

87356 CRIMINAL RECORD EXEMPTION (Continued)**87356**

HANDBOOK CONTINUES

- (48) Penal Code Section 667.5(c)(13) – Enhancement for violation of Penal Code Section 12308, 12309 or 12310 – Exploding or igniting or attempting to explode or ignite any destructive device or explosive with intent to commit murder.
- (49) Penal Code Section 667.5(c)(14) - Any kidnapping – Penal Code Sections 207, 208, 209, 209.5 and 210.
- (50) Penal Code Section 667.5(c)(22) - Any violation of Penal Code Section 12022.53 – Enhancement for listed felonies where use of a firearm.
- (51) Penal Code Section 667.5(c)(23) – Use of weapon of mass destruction.
- (52) Business and Professions Code Section 729 – Felony sexual exploitation by a physician, psychotherapist, counselor, etc.

HANDBOOK ENDS HERE

- (n) The Department shall consider granting a simplified criminal record exemption if the individual has the criminal history profile outlined in Sections 87356(n)(1) through (4) below:
 - (1) The individual does not have a demonstrated pattern of criminal activity;
 - (2) The individual has no more than one conviction;
 - (3) The conviction is a misdemeanor and is a crime that is nonviolent and does not pose a risk of harm to an individual; and
 - (4) It has been at least five consecutive years since the completion of the most recent period of incarceration or supervised probation.
- (o) At the Department's discretion, an individual who is otherwise eligible for a simplified exemption may be required to go through the standard exemption process if the Department determines such action will help to protect the health and safety of clients.

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- (p) If the Department denies or cannot grant a criminal record exemption the Department shall:
- (1) For initial applicants, deny the application.
 - (2) For current licensees, the Department may institute an administrative action, including but not limited to, revocation of the license.
 - (3) For current employees, exclude the affected individual pursuant to Health and Safety Code Section 1569.58, deny the application or revoke the license if the individual continues to provide services and/or reside at the facility.
 - (4) For individuals residing in the facility or the licensee, exclude the affected individual pursuant to Health and Safety Code Section 1569.58, deny the application or revoke the license, if the individual continues to provide services and/or reside at the facility.
- (q) If a request for an exemption has been denied, the individual shall be excluded for a period of two years unless the individual has been convicted of a crime for which no exemption may be granted pursuant to Section 87356(m). If a request for an exemption has been denied based on a conviction of a crime for which no exemption may be granted, the individual shall be excluded for the remainder of the individual's life.
- (1) If the Department determines during the review of an exemption request, that the individual was denied an exemption for a conviction of a crime for which an exemption may be granted within the preceding two years, the Department shall cease any further review of the request until two years have elapsed from the date of the denial. In cases where the individual requested a hearing on an exemption denial, the Department shall cease review of the request for an exemption until two years from the effective date of the decision and order of the Department upholding the denial. In cases where the individual submitted a petition for reinstatement or reduction in penalty pursuant to Government Code Section 11522 that was denied, the Department shall cease review of the request for an exemption until two years from the effective date of the decision and order of the Department denying the petition.
 - (2) An exclusion order based solely upon a denied exemption shall remain in effect and the individual shall not be employed in or present in a licensed facility or certified home, unless either a petition or an exemption is granted.
 - (3) If an individual who has previously been denied an exemption re-applies after the relevant time period described in Section 87356(q)(1) above, the Department may, in accordance with the provisions in Section 87356 et seq., grant or deny the subsequent request for an exemption.

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- (4) If an individual submits a petition pursuant to Government Code section 11522 for reinstatement or reduction of penalty for an exclusion, an individual must submit his/her fingerprints through an electronic fingerprinting system approved by the Department and submit to the Department a statement of the reason why the individual should be permitted to work or be present in a facility, along with all information required of an individual requesting a criminal record exemption as provided in Section 87356. If it is determined, based upon information provided by the Department of Justice, that the individual has been convicted of a crime for which no exemption may be granted, the petition shall be denied. An individual's failure to submit fingerprints or other information as requested by the Department, shall be grounds for denial of the petition. The burden shall be on the petitioner to prove sufficient rehabilitation and good character to justify the granting of the petition.
- (r) A licensee or applicant for a license may request a transfer of a criminal record exemption from one state licensed facility to another by providing the following documents to the Department:
- (1) A signed Criminal Record Exemption Transfer Request, LIC 9188 (Rev. 9/03).
 - (2) A copy of the individual's:
 - (A) Driver's license, or
 - (B) Valid identification card issued by the Department of Motor Vehicles, or
 - (C) Valid photo identification issued by another state of the United States Government if the individual is not a California resident.
 - (3) Any other documentation required by the Department (e.g., LIC 508, Criminal Record Statement [Rev. 1/03] and job description).
 - (s) The Department may consider factors including, but not limited to, the following in determining whether or not to approve the transfer of an exemption from one facility to another:
 - (1) The basis on which the Department granted the exemption;
 - (2) The nature and frequency of client contact in the new position;
 - (3) The category of facility where the individual wishes to transfer;
 - (4) The type of clients in the facility where the individual wishes to transfer;

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- (5) Whether the exemption was appropriately evaluated and granted in accordance with existing exemption laws or regulations; or
- (6) Whether the exemption meets current exemption laws or regulations.
- (t) If the Department denies the individual's request to transfer a criminal record exemption, the Department shall provide the individual and the licensee with written notification that states the Department's decision and informs the affected individual of their right to an administrative hearing to contest the Department's decision.
- (u) At the Department's discretion, an exemption may be rescinded if it is determined that:
 - (1) The exemption was granted in error, or
 - (2) The exemption does not meet current exemption laws or regulations, or
 - (3) The conviction for which an exemption was granted subsequently becomes non-exemptible by law.
- (v) The Department may rescind an individual's criminal record exemption if the Department obtains evidence showing that the individual engaged in conduct which is inconsistent with the good character requirement of a criminal record exemption, as evidenced by factors including, but not limited to, the following:
 - (1) Violations of licensing laws or regulations;
 - (2) Any conduct by the individual that indicates that the individual may pose a risk to the health and safety of any individual who is or may be a client;
 - (3) Nondisclosure of a conviction or evidence of lack of rehabilitation that the individual failed to disclose to the Department, even if it occurred before the exemption was issued; or
 - (4) The individual is convicted of a subsequent crime.
- (w) If the Department rescinds an exemption the Department shall:
 - (1) Notify the licensee and the affected individual in writing; and
 - (2) Initiate an administrative action.

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- (x) If the Department learns that an individual with a criminal record clearance or exemption has been convicted of a subsequent crime, the Department, at its sole discretion, may immediately initiate an administrative action to protect the health and safety of clients.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Section 1569.17, Health and Safety Code; Gresher v. Anderson (2005) 127 Cal App. 4th 88.

Article 7. Personnel**87405 ADMINISTRATOR - QUALIFICATIONS AND DUTIES****87405**

- (a) All facilities shall have a qualified and currently certified administrator. The licensee and the administrator may be one and the same person. The administrator shall have sufficient freedom from other responsibilities and shall be on the premises a sufficient number of hours to permit adequate attention to the management and administration of the facility as specified in this section. When the administrator is not in the facility, there shall be coverage by a designated substitute who shall have qualifications adequate to be responsible and accountable for management and administration of the facility as specified in this section. The Department may require that the administrator devote additional hours in the facility to fulfill his/her responsibilities when the need for such additional hours is substantiated by written documentation.
- (b) The administrator of a facility or facilities shall have the responsibility and authority to carry out the policies of the licensee.
- (c) Failure to comply with all licensing requirements pertaining to certified administrators may constitute cause for revocation of the license of the facility.
- (d) The administrator shall have the qualifications specified in Sections 87405(d)(1) through (7). If the licensee is also the administrator, all requirements for an administrator shall apply.
- (1) Knowledge of the requirements for providing care and supervision appropriate to the residents.
 - (2) Knowledge of and ability to conform to the applicable laws, rules and regulations.
 - (3) Ability to maintain or supervise the maintenance of financial and other records.
 - (4) When applicable, the ability to direct the work of others.
 - (5) Good character and a continuing reputation of personal integrity.
 - (6) Have a high school diploma or equivalent, such as a General Education Development (GED) certificate.
 - (7) Be at least 21 years of age.
- (e) The administrator of a facility licensed for sixteen (16) to forty-nine (49) residents shall have completed, with a passing grade, at least fifteen (15) college or continuing education semester or equivalent quarter units; and shall have at least one year's experience providing residential care to the elderly; or equivalent education and experience as approved by the Department.
- (f) The administrator in facilities licensed for fifty (50) or more shall have two years of college; at least three years experience providing residential care to the elderly; or equivalent education and experience as approved by the licensing agency.

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- (g) Administrators employed/licensed prior to July 1, 1982, shall not be required to comply with the college and continuing education requirements in Section 87405(e) or the college requirements in Section 87405(f) provided that they have no break in employment as a Residential Care Facility for the Elderly administrator exceeding three (3) consecutive years.
- (h) The administrator shall have the responsibility to:
 - (1) Administer the facility in accordance with these regulations and established policy, program and budget.
 - (2) Where applicable, report to the licensee on the operation of the facility, and provide the licensee with necessary interpretations of recognized standards of care and supervision.
 - (3) Develop an administrative plan and procedures to ensure clear definition of lines of responsibility, equitable workloads, and adequate supervision.
 - (4) Recruit, employ and train qualified staff, and terminate employment of staff who perform in an unsatisfactory manner.
 - (5) Provide or ensure the provision of services to the residents with appropriate regard for the residents' physical and mental well-being and needs, including those services identified in the residents' Pre-Admission Appraisals, specified in Section 87457, Pre-admission Appraisal, and Reappraisal, as specified in Section 87463.
 - (6) Make special provisions for the safety and guidance of residents with visual or auditory deficiencies.
 - (7) Make provision for the resident with unmet needs to attend available community programs, including but not limited to, arranging for transportation.
 - (8) Have the personal characteristics, physical energy and competence to provide care and supervision and, where applicable, to work effectively with social agencies.
- (i) In those cases where the individual is both the licensee and the administrator of a residential care facility for the elderly, the individual shall comply with all of the licensee and certified administrator requirements.

NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.17, 1569.31, 1569.312, 1569.315, 1569.613, 1569.616 and 1569.62, Health and Safety Code.

87406 ADMINISTRATOR CERTIFICATION REQUIREMENTS**87406**

- (a) All individuals shall be residential care facility for the elderly certificate holders prior to being employed as an administrator.
- (1) Applicants who possess a valid Nursing Home Administrator license, issued by the California Department of Public Health, shall be exempt from completing an approved Initial Certification Training Program and taking a written exam, provided the individual completes twelve (12) hours of classroom instruction in the following Core of Knowledge areas:
- (A) Four (4) hours of instruction in laws, regulations, policies, and procedural standards that impact the operations of residential care facilities for the elderly, including but not limited to the authority referenced in this Chapter.
- (B) Four (4) hours of instruction in medication management, including the use, misuse, and interaction of drugs commonly used by the elderly, including antipsychotics, and the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia.
- (C) Four (4) hours of instruction in resident admission, retention, and assessment procedures.
- (2) Individuals who were both the licensee and administrator on or before July 1, 1991, shall complete an Initial Certification Training Program but shall not be required to take the written exam. Individuals exempted from the written exam shall be issued a conditional certification valid only for the administrator of the facility for which the exemption was granted.
- (A) As a condition to becoming a certified administrator of another facility, a holder of a conditional certificate issued pursuant to Section 87406(a)(2) shall be required to pass the written exam.
- (B) As a condition to applying for a new facility license, the holder of a conditional certificate issued pursuant to Section 87406(a)(2) shall be required to pass the written exam.
- (3) An applicant for licensure shall be subject to the same application process for Initial Certification of Administrators as set forth in Section 87406(b).
- (b) To receive his/her certificate an applicant shall:
- (1) Unless exempted by Section 87406(a)(1), successfully complete a Department-approved Initial Certification Training Program as described in Section 87785(h).
- (2) Unless exempted by Section 87406(a)(1) or (a)(2), pass a written exam developed and administered by the Department within sixty (60) days of completion of an Initial Certification Training Program and within three (3) attempts.

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- (3) Submit a completed Application for Administrator Certification form LIC 9214 to the Department's Administrator Certification section within thirty (30) days of being notified of having passed the exam, or if the applicant is exempt from taking the written exam, within 30 days of completing the Initial Certification Training Program. The application shall contain the following:
- (A) The applicant's name, address, e-mail address, phone number(s), and date of birth.
 - (B) A statement of whether or not the applicant:
 - (i) Held or currently holds a license, certification or other approval as a professional in a specified field and the certificate or license number(s).
 - (ii) Held or currently holds a State-issued care facility license or was or is employed by a State-licensed care facility and the license number.
 - (iii) Was the subject of any legal, administrative or other action involving licensure, certification or other approvals as specified in Sections 87406(b)(3)(B)(i) and (ii).
 - (C) Proof that the applicant has successfully completed a Department-approved Initial Certification Training Program or, in the case of a Nursing Home Administrator, proof of completion of the required hours of classroom instruction as specified in Section 87406(a)(1).
 - (D) Documentation of passing the written exam or qualifying for an exemption pursuant to Section 87406(a)(1) or (a)(2).
 - (E) A statement certifying that the information submitted is true and correct.
 - (F) A completed Criminal Record Statement form LIC 508.
 - (G) A completed Request for Live Scan Service form LIC 9163, signed and dated by the live scan vendor, to document that the applicant has submitted fingerprints to the Department of Justice at a live scan location, or a statement that the applicant has a current criminal record clearance or an exemption on file with the Department.
 - (H) A non-refundable one hundred dollar (\$100) processing fee.
 - (I) A copy of the front and back of his/her current nursing home wallet license, or equivalent, if the applicant is a current Nursing Home Administrator.
- (c) The Department shall not issue a certificate until it receives notification from the Department of Justice that the applicant has a criminal record clearance or an exemption pursuant to Health and Safety Code section 1569.17 or is able to transfer a current criminal record clearance or an exemption pursuant to Health and Safety Code section 1569.17(g)(1).

87406 ADMINISTRATOR CERTIFICATION REQUIREMENTS (Continued)**87406**

- (d) No person shall cheat on, subvert, or attempt to subvert, the exam given by the Department, including, but not limited to, engaging in, soliciting, or procuring any of the following:
 - (1) Any form of communication between one or more examinees and any other person, other than a proctor or exam official, while the exam is in progress.
 - (2) The taking of all or a part of the exam by a person other than the applicant.
 - (3) Possession or use at any time during the exam or while the examinee is on the exam premises of any device, material, or document that is not expressly authorized for use by examinees during the exam, including, but not limited to, notes, crib sheets, textbooks, and electronic devices.
 - (4) Failure to follow any exam instruction or rule related to exam security.
- (e) Any applicant caught willfully cheating under this section shall be deemed to have failed that exam and may be denied certification pursuant to Section 87408 as a result of the conduct.
- (f) It shall be unlawful for any person not certified under this section to hold himself or herself out as a certified administrator. Any person willfully making any false representation as being a certified administrator is guilty of a misdemeanor.
- (g) Certificates issued under this section shall be renewed every two (2) years provided the certificate holder has complied with all renewal requirements.
- (h) Certificates shall be valid for a period of two (2) years and expire on either the anniversary date of initial issuance or on the individual's birthday during the second calendar year following certification.
 - (1) The certificate holder shall make an irrevocable election to have his or her recertification date for any subsequent recertification either on the date two (2) years from the date of issuance of the certificate or on the individual's birthday during the second calendar year following certification.
- (i) Time deadlines specified in Sections 87406(b)(2) and (3) may be extended up to sixty (60) days in total for good cause as determined by the Department. Any request for an extension of time shall be made in writing to the Administrator Certification Section Manager within sixty (60) days of completing the Initial Certification Training Program and shall contain a statement of all facts the applicant believes constitute good cause to extend a time deadline.
 - (1) Good cause may include death of an immediate family member, required fulfillment of military service or other civic duty, or another unavoidable and verifiable event as determined by the Department. Failure of the exam shall not constitute good cause for an extension.

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- (2) Absent a good cause extension, the Department shall not process and may deem withdrawn an application that fails to meet the time deadlines specified in Sections 87406(b)(2) or (3).
- (3) Any applicant who fails to meet the time deadlines specified in Sections 87406(b)(2) and (3) must begin the certification process described in Section 87406(b) anew, and complete it within the time deadlines specified in Sections 87406(b)(2) and (3).

NOTE: Authority cited: Sections 1569.23, 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.17, 1569.171, 1569.23, 1569.315, 1569.50, 1569.613 and 1569.616, Health and Safety Code.

87407 ADMINISTRATOR RECERTIFICATION REQUIREMENTS 87407

- (a) Administrators shall complete at least forty (40) classroom hours of continuing education during each two (2)-year certification period, including.
 - (1) For administrators who renew their administrator certification on or after January 1, 2003, at least eight (8) hours in subjects related to serving residents with Alzheimer's Disease and other dementias, including, but not limited to, instruction related to direct care, physical environment, and admissions procedures and assessment.
 - (A) This instruction may be taken as a single eight (8)-hour class or in smaller increments that total at least eight (8) hours within each two (2)-year renewal period.
 - (2) At least four (4) hours of instruction in laws, regulations, policies, and procedural standards that impact the operation of residential care facilities for the elderly, including but not limited to the regulations contained in this Chapter.
 - (3) If not included in the certified administrator's Initial Certification Training Program, at least one (1) hour of instruction in cultural competency and sensitivity in issues relating to the underserved aging lesbian, gay, bisexual, and transgender community.
- (b) Continuing education hours must be sufficiently related by subject matter and logic to the Core of Knowledge, current and relevant to facility operations and care, and completed through courses approved for residential care facility for the elderly administrators by the Department.
- (c) Courses approved for continuing education credit shall require the physical presence of the certificate holder in a classroom setting as defined in Section 87101(c)(7), except that up to one-half of the required forty (40) hours of continuing education necessary to renew the certificate may be satisfied through interactive online courses as specified in Section 87788(i)(1).
 - (1) The Department will not count toward the continuing education requirements more than ten (10) hours of instruction, in-class and/or online, completed in a single day.

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- (2) Home study or correspondence-type courses will not be counted toward completion of continuing education requirements as they are not interactive by design.
 - (3) Completion of an Initial Certification Training Program or component(s) thereof will not be counted toward completion of continuing education requirements as the Program is intended for new administrators.
 - (4) Any specific continuing education course may only be accepted once per renewal period toward completion of the continuing education requirements.
- (d) To apply for recertification prior to the expiration date of the certificate, the certificate holder shall submit to the Department's Administrator Certification Section, post-marked on, or up to ninety (90) days before, the certificate expiration date:
- (1) A completed Application for Administrator Certification form LIC 9214.
 - (2) Evidence of completion of forty (40) continuing education hours as specified in Section 87407(a), or, if applicable, twenty (20) continuing education hours as specified in Section 87407(g).
 - (3) Payment of a non-refundable one hundred dollar (\$100) processing fee.
 - (4) A copy of the front and back of his/her current nursing home wallet license, or equivalent, if the applicant is a current Nursing Home Administrator.
- (e) To apply for recertification after the expiration date of the certificate, but within four (4) years of the certificate expiration date, the certificate holder shall submit to the Department's Administrator Certification Section:
- (1) A completed Application for Administrator Certification form LIC 9214.
 - (2) Evidence of completion of the required continuing education hours as specified in Section 87407(a), or 87407(g), if applicable. The total number of hours required for recertification shall be determined by computing the number of continuing education hours the certificate holder would have been required to complete if they had remained certified. The date of computation shall be the date application for renewal is received by the Department's Administrator Certification Section.
 - (3) Payment of a non-refundable delinquency fee equal to three times the one hundred dollar (\$100) renewal fee, or three hundred dollars (\$300).
 - (4) A copy of the front and back of his/her current nursing home wallet license, or equivalent, if the applicant is a current Nursing Home Administrator.
- (f) Certificates not renewed within four (4) years of their expiration date shall not be renewed, restored, reissued or reinstated.

87407 ADMINISTRATOR RECERTIFICATION REQUIREMENTS (Continued) 87407

- (1) Holders of certificates not renewed within four (4) years of their expiration date must begin anew the certification process specified in Section 87406(b).
- (g) Certificate holders who possess a valid Nursing Home Administrator license shall be required to complete only twenty (20) of the required forty (40) hours of continuing education, but including the requirements of Section 87407(a)(1)-(3).
- (h) Certificate holders, as a condition of recertification, shall have a current criminal record clearance or exemption.
- (i) A non-refundable processing fee of twenty-five dollars (\$25) shall be paid for the replacement of a lost certificate.
- (j) A certificate holder shall report any change of mailing address within thirty (30) days of the change to the Department's Administrator Certification Section.
- (k) Whenever a certified administrator assumes or relinquishes responsibility for administering a residential care facility for the elderly, he or she shall provide written notice, within thirty (30) days, to:
 - (1) The local licensing office responsible for receiving information regarding personnel changes at the licensed facility with whom the certificate holder is or was associated, and
 - (2) The Department's Administrator Certification Section.

NOTE: Authority cited: Sections 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.17, 1569.171, 1569.23, 1569.315, 1569.613 and 1569.616, Health and Safety Code.

87408 ADMINISTRATOR CERTIFICATE DENIAL OR REVOCATION 87408

- (a) The Department may deny or revoke any administrator certificate for violation of licensing regulations or on any of the following grounds:
 - (1) The certificate holder or applicant procured or attempted to procure a certificate by fraud, misrepresentation, bribery, or other unlawful behavior.
 - (2) The certificate holder or applicant knowingly made or gave a false statement or information in conjunction with the application for a certificate.
 - (3) The Department has issued an exclusion order against the certificate holder pursuant to Health and Safety Code sections 1558, 1568.092, 1569.58 or 1596.8897 after the Department issued the certificate, and;
 - (A) The certificate holder did not appeal the exclusion order, or

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- (B) After the appeal, the Department issued a decision and order that upheld the exclusion order.
- (4) The certificate holder or applicant does not have a current criminal record clearance or exemption.
- (5) The certificate holder fails to comply with certificate renewal requirements.
- (A) The Department may reinstate a certificate that has been revoked for failure to comply with certificate renewal requirements provided all conditions for recertification have been satisfied, including payment of all appropriate renewal and delinquency fees.
- (6) The certificate holder engaged in conduct which is inimical to the health, morals, welfare, or safety of either an individual in or receiving services from the facility or the people of the State of California.
- (b) Any denial or revocation of an administrator certificate may be appealed as provided by Health and Safety Code section 1569.51.
- (c) Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a denial or revocation action shall be processed in accordance with the provisions of Health and Safety Code section 1569.16.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.16, in pertinent part, provides that:

"(a)(1) If an applicant for a license indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), Chapter 2 (commencing with Section 1250), Chapter 3 (commencing with Section 1500), Chapter 3.01 (commencing with Section 1568.01), Chapter 3.4 (commencing with Section 1596.70), Chapter 3.5 (commencing with Section 1596.90), or Chapter 3.6 (commencing with Section 1597.30) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years have elapsed from the date of the revocation.

(a)(3) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant was excluded from a facility licensed by the department pursuant to Section 1558, 1568.092, 1569.58, or 1596.8897, the department shall cease any further review of the application unless the excluded individual has been reinstated pursuant to Section 11522 of the Government Code by the department.

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HANDBOOK CONTINUES

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) and the application was denied within the last year, the department shall, except as provided in Section 1569.22, cease further review of the application until one year has elapsed from the date of the denial letter. In those circumstances where denials are appealed and upheld at an administrative hearing, review of the application shall cease for one year from the date of the decision and order being rendered by the department. The cessation of review shall not constitute a denial of the application."

HANDBOOK ENDS HERE

NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.17, 1569.50, 1569.51, 1569.613 and 1569.616, Health and Safety Code.

87409 ADMINISTRATOR CERTIFICATE FORFEITURE**87409**

- (a) Unless otherwise ordered by the Department, the certificate shall be considered forfeited under any of the following conditions:
- (1) The Department has revoked any license held by the certificate holder after the Department issued the certificate.
 - (2) The Department has issued an exclusion order against the certificate holder pursuant to Health and Safety Code sections 1558, 1568.092, or 1569.58 after the Department issued the certificate, and;
 - (A) The certificate holder did not appeal the exclusion order or,
 - (B) After the appeal, the Department issued a decision and order that upheld the exclusion order.
- (b) Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a certificate has been forfeited shall be processed in accordance with the provisions of Health and Safety Code sections 1569.16 and/or 1569.58(h).

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Health and Safety Code section 1569.16, in pertinent part, provides that:

"(a)(1) If an application for a license indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), Chapter 2 (commencing with Section 1250), Chapter 3 (commencing with Section 1500), Chapter 3.01 (commencing with Section 1568.01), Chapter 3.4 (commencing with Section 1596.70), Chapter 3.5 (commencing with Section 1596.90), or Chapter 3.6 (commencing with Section 1597.30) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years have elapsed from the date of the revocation.

(a)(3) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant was excluded from a facility licensed by the department pursuant to Section 1558, 1568.092, 1569.58, or 1596.8897, the department shall cease any further review of the application unless the excluded individual has been reinstated pursuant to Section 11522 of the Government Code by the department.

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) and the application was denied within the last year, the department shall, except as provided in Section 1569.22, cease further review of the application until one year has elapsed from the date of the denial letter. In those circumstances where denials are appealed and upheld at an administrative hearing, review of the application shall cease for one year from the date of the decision and order being rendered by the department. The cessation of review shall not constitute a denial of the application."

Health and Safety Code section 1569.58(h), in pertinent part, provides that:

"(1)(A) In cases where the excluded person appealed the exclusion order and there is a decision and order of the department upholding the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or from being a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

HANDBOOK CONTINUES

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(Continued)**87409**

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(1)(B) The excluded individual may petition for reinstatement one year after the effective date of the decision and order of the department upholding the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the decision and order.

(2)(A) In cases where the department informed the excluded person of his or her right to appeal the exclusion order and the excluded person did not appeal the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

(2)(B) The excluded individual may petition for reinstatement after one year has elapsed from the date of the notification of the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the exclusion order."

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NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1568.092, 1569.16, 1569.50, 1569.58 and 1569.616, Health and Safety Code.

87411 PERSONNEL REQUIREMENTS - GENERAL**87411**

- (a) Facility personnel shall at all times be sufficient in numbers, and competent to provide the services necessary to meet resident needs. In facilities licensed for sixteen or more, sufficient support staff shall be employed to ensure provision of personal assistance and care as required in Section 87608, Postural Supports. Additional staff shall be employed as necessary to perform office work, cooking, house cleaning, laundering, and maintenance of buildings, equipment and grounds. The licensing agency may require any facility to provide additional staff whenever it determines through documentation that the needs of the particular residents, the extent of services provided, or the physical arrangements of the facility require such additional staff for the provision of adequate services.
- (b) All persons who supervise employees or who supervise or care for residents shall be at least eighteen (18) years of age.

87411 PERSONNEL REQUIREMENTS - GENERAL (Continued)**87411**

- (c) All RCFE staff who assist residents with personal activities of daily living shall receive at least ten hours of initial training within the first four weeks of employment and at least four hours annually thereafter.
- (1) Staff providing care shall receive appropriate training in first aid from persons qualified by such agencies as the American Red Cross.
 - (2) This training shall be administered on the job, in a classroom setting, or any combination of the two.
 - (3) The training shall include, but not be limited to, the following:
 - (A) The aging process and physical limitations and special needs of the elderly. At least two (2) of the required ten (10) hours shall cover this subject.
 - (B) Importance and techniques of personal care services, including but not limited to, bathing, grooming, dressing, feeding, toileting, and universal precautions. At least three (3) of the required ten (10) hours shall cover this subject.
 - (C) Residents rights, as specified in Section 87468, Personal Rights.
 - (D) Policies and procedures regarding medications, including the knowledge in Section 87411(d)(4). At least two (2) of the required ten (10) hours shall cover this subject. Any on-the-job training provided for the requirements in Section 87411(d)(4) may also count towards the requirement in this subsection.
 - (E) Psychosocial needs of the elderly, such as recreation, companionship, independence, etc.
 - (F) Recognizing signs and symptoms of dementia in individuals.
 - (4) All training shall be conducted by a person who is knowledgeable in a subject that is relevant to the subject area in which training is to be provided, and who satisfies at least one of the following criteria related to education and experience:
 - (A) Both a four-year college degree, graduate degree or professional degree, and two (2) years of experience in an area relevant to caring for the needs of the elderly, or
 - (B) License to work as a health care provider in California, or
 - (C) At least two years of experience in California as an administrator of an RCFE, within the last eight years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s)(9).

87411 PERSONNEL REQUIREMENTS - GENERAL (Continued)**87411**

- (5) Training may include use of books, video instruction tapes, interactive CD-ROMs and similar materials, upon the approval of that material by a trainer who satisfies the criteria of Section 87411(c)(3).
 - (6) The licensee shall maintain documentation pertaining to staff training in the personnel records, as specified in Section 87412(c)(2). For on-the-job training, documentation shall consist of a statement or notation, made by the trainer, of the content covered in the training. Each item of documentation shall include a notation that indicates which of the criteria of Section 87411(c)(3) is met by the trainer.
- (d) All personnel shall be given on the job training or have related experience in the job assigned to them. This training and/or related experience shall provide knowledge of and skill in the following, as appropriate for the job assigned and as evidenced by safe and effective job performance:
- (1) Principles of good nutrition, good food preparation and storage, and menu planning.
 - (2) Housekeeping and sanitation principles.
 - (3) Skill and knowledge required to provide necessary resident care and supervision, including the ability to communicate with residents.
 - (4) Knowledge required to safely assist with prescribed medications which are self-administered.
 - (5) Knowledge necessary in order to recognize early signs of illness and the need for professional help.
 - (6) Knowledge of community services and resources.
- (e) In facilities licensed for sixteen (16) or more, the requirements of Section 87411(d) shall be met with planned on the job training program that utilizes orientation, skill training and continuing education.
- (f) All personnel, including the licensee and administrator, shall be in good health, and physically and mentally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a chest x-ray or an intradermal test, performed by a physician not more than six (6) months prior to or seven (7) days after employment or licensure. A report shall be made of each screening, signed by the examining physician. The report shall indicate whether the person is physically qualified to perform the duties to be assigned, and whether he/she has any health condition that would create a hazard to him/herself, other staff members or residents. A signed statement shall be obtained from each volunteer affirming that he/she is in good health. Personnel with evidence of physical illness or emotional instability that poses a significant threat to the well-being of residents shall be relieved of their duties.

87411 PERSONNEL REQUIREMENTS - GENERAL (Continued)**87411**

- (g) Prior to employment or initial presence in the facility, all employees and volunteers subject to a criminal record review shall:
- (1) Obtain a California clearance or a criminal record exemption as required by law or Department regulations or
 - (2) Request a transfer of a criminal record clearance as specified in Section 87355(c) or
 - (3) Request and be approved for a transfer of a criminal record exemption, as specified in Section 87356(r), unless, upon request for a transfer, the Department permits the individual to be employed, reside or be present at the facility.
- (h) All services requiring specialized skills shall be performed by personnel qualified by training or experience in accordance with recognized professional standards.
- (i) Residents shall not be used as substitutes for required staff but may, as a voluntary part of their program of activities, participate in household duties and other tasks suited to the resident's needs and abilities.
- (j) Volunteers may be utilized but may not be included in the facility staffing plan. Volunteers shall be supervised.

NOTE: Authority cited: Sections 1569.30 and 1569.625, Health and Safety Code. Reference: Sections 1569.17, 1569.31, 1569.312 and 1569.625, Health and Safety Code; and Section 42001, Vehicle Code.

87412 PERSONNEL RECORDS**87412**

- (a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each employee. Each personnel record shall contain the following information:
- (1) Employee's full name.
 - (2) Social Security number.
 - (3) Date of employment.
 - (4) Written verification that the employee is at least 18 years of age, including, but not necessarily limited to, a copy of his/her birth certificate or driver's license.

87412 PERSONNEL RECORDS (Continued)**87412**

- (5) Home address and telephone number.
 - (6) Educational background.
 - (A) For administrators this shall include verification that he/she meets the educational requirements in Sections 87405(d) through (g).
 - (7) Past experience, including types of employment and former employers.
 - (8) Type of position for which employed.
 - (9) Termination date if no longer employed by the facility.
 - (10) Reasons for leaving.
 - (11) A health screening as specified in Section 87411, Personnel Requirements - General.
 - (12) Hazardous health conditions documents as specified in Section 87411, Personnel Requirements - General.
 - (13) For employees that are required to be fingerprinted pursuant to Section 87355, Criminal Record Clearance:
 - (A) A signed statement regarding their criminal record history as required by Section 87355(d).
 - (B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).
 - 1. For Certified Administrators, a copy of their current and valid Administrative Certification meets this requirement.
- (b) Personnel records shall be maintained for all volunteers and shall contain the following:
- (1) A health statement as specified in Section 87411(f).
 - (2) Health screening documents as specified in Section 87411(f).
 - (3) For volunteers that are required to be fingerprinted pursuant to Section 87355, Criminal Record Clearance:
 - (A) A signed statement regarding their criminal record history as required by Section 87355(d).

87412 PERSONNEL RECORDS (Continued)**87412**

- (B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).
- (c) Licensees shall maintain in the personnel records verification of required staff training and orientation.
 - (1) The following staff training and orientation shall be documented:
 - (A) For staff who assist with personal activities of daily living, there shall be documentation of at least ten hours of initial training within the first four weeks of employment, and at least four hours of training annually thereafter in one or more of the content areas as specified in Section 87411(c)(2).
 - (B) For staff who provide direct care to residents with dementia in a facility in which the licensee advertises dementia special care, programming, and/or environments, the licensee shall document the following:
 - 1. The orientation received as specified in Section 87707(a)(1).
 - 2. The in-service training received as specified in Section 87707(a)(2).
 - (2) Documentation of staff training shall include:
 - (A) Trainer's full name;
 - (B) Subject(s) covered in the training;
 - (C) Date(s) of attendance; and
 - (D) Number of training hours per subject.
 - 1. If the training is provided by a trainer in a classroom setting, documentation shall consist of notices of course completion signed by the trainer.
 - 2. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.
 - 3. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.

87412 PERSONNEL RECORDS (Continued)**87412**

- (d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in Section 87406, Administrator Certification Requirements or the recertification requirements in Section 87407, Administrator Recertification Requirements.
- (e) In all cases, personnel records shall demonstrate adequate staff coverage necessary for facility operation by documenting the hours actually worked.
- (f) All personnel records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:
 - (1) Licensing representatives shall not remove any current emergency or health-related information for current personnel unless the same information is otherwise readily available in another document or format.
 - (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
 - (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (g) All personnel records shall be maintained at the facility.
 - (1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily available to the licensing agency at the facility as specified in Section 87412(f).
- (h) All personnel records shall be retained for at least three (3) years following termination of employment.

NOTE: Authority cited: Sections 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.17(c), 1569.31, 1569.312, 1569.613, 1569.616, 1569.625, and 1569.626, Health and Safety Code.

87413 PERSONNEL - OPERATIONS**87413**

- (a) In each facility:
- (1) When regular staff members are absent, there shall be coverage by personnel with qualifications adequate to perform the assigned tasks.
 - (2) Care and supervision of residents shall be provided without physical or verbal abuse, exploitation or prejudice.
 - (3) The licensee shall provide for and encourage all personnel to report observations or evidence of such abuse, exploitation or prejudice.
- (b) If the facility is licensed for sixteen (16) persons or more, there shall be a dated weekly employee time schedule displayed conveniently for employee reference. The schedule shall contain employee's name, job title, hours of work, and days off.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31 and 1569.312, Health and Safety Code.

87415 NIGHT SUPERVISION**87415**

- (a) The following persons providing night supervision from 10:00 p.m. to 6:00 a.m. shall be familiar with the facility's planned emergency procedures, shall be trained in first aid as required in Section 87465, Incidental Medical and Dental Care Services, and shall be available as indicated below to assist in caring for residents in the event of an emergency:
- (1) In facilities caring for less than sixteen (16) residents, there shall be a qualified person on call on the premises.
 - (2) In facilities caring for sixteen (16) to one hundred (100) residents at least one employee shall be on duty on the premises, and awake. Another employee shall be on call, and capable of responding within ten minutes.
 - (3) In facilities caring for one hundred one (101) to two hundred (200) residents, one employee shall be on call, on the premises; one employee shall be on duty on the premises and awake; and one employee shall be on call and capable of responding within ten minutes.
 - (4) Every additional 100 residents, or fraction thereof, shall require an additional one (1) staff person on duty, on the premises and awake.

87415 NIGHT SUPERVISION (Continued)**87415**

- (5) In facilities required to have a signal system, specified in Section 87303, Maintenance and Operation, at least one night staff person shall be located to enable immediate response to the signal system. If the signal system is visual only, that person shall be awake.
- (6) The requirements of this section shall not prohibit compliance with additional supervisory requirements required by the State Fire Marshal.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31 and 1569.312, Health and Safety Code.

Article 8. Resident Assessments, Fundamental Services and Rights**87452 DEFICIENCIES IN COMPLIANCE****87452**

Renumbered to Section 87756 by Manual Letter No. CCL-08-01, effective 3/5/08.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.15, 1569.16, 1569.17, 1569.20, and 1569.205, Health and Safety Code.

87455 ACCEPTANCE AND RETENTION LIMITATIONS**87455**

- (a) Acceptance or retention of residents by a facility shall be in accordance with the criteria specified in this Article 8 and Section 87605, Health and Safety Protection, and the following.
- (b) The following persons may be accepted or retained in the facility:
 - (1) Persons capable of administering their own medications.
 - (2) Persons receiving medical care and treatment outside the facility or who are receiving needed medical care from a visiting nurse.
 - (3) Persons who because of forgetfulness or physical limitations need only be reminded or to be assisted to take medication usually prescribed for self-administration.
 - (4) Persons with problems including, but not limited to, forgetfulness, wandering, confusion, irritability, and inability to manage money.
 - (5) Persons with mild temporary emotional disturbance resulting from personal loss or change in living arrangement.
 - (6) Persons who are bedridden provided the requirements of Section 87606 are met.
 - (7) Persons who are under 60 years of age whose needs are compatible with other residents in care, if they require the same amount of care and supervision as do the other residents in the facility.
 - (8) Persons who have been diagnosed as terminally ill and who have obtained the services of hospice, certified in accordance with federal medicare conditions of participation and licensure, provided the licensee has obtained a facility hospice care waiver in accordance with the provisions of Section 87632, Hospice Care Waiver, and hospice care is being provided in accordance with the provisions of Section 87633, Hospice Care for Terminally Ill Residents.
- (c) No resident shall be accepted or retained if any of the following apply:
 - (1) The resident has active communicable tuberculosis.

87455 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)**87455**

- (2) The resident requires 24-hour, skilled nursing or intermediate care as specified in Health and Safety Code Sections 1569.72(a) and (a)(1):

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Health and Safety Code Sections 1569.72(a) and (a)(1) provide in part:

"(a) ...no resident shall be admitted or retained in a residential care facility for the elderly if any of the following apply:

- (1) The resident requires 24-hour, skilled nursing or intermediate care."

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- (3) The resident's primary need for care and supervision results from either:
- (A) An ongoing behavior, caused by a mental disorder, that would upset the general resident group; or
- (B) Dementia, unless the requirements of Section 87705, Care of Persons with Dementia, are met.
- (d) A resident suspected of having a contagious or infectious disease shall be isolated, and a physician contacted to determine suitability of the resident's retention in the facility.

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Health and Safety Code section 1569.73(a) provides in relevant part:

- "(a) Notwithstanding Section 1569.72 or any other provision of law, a residential care facility for the elderly may obtain a waiver from the department for the purpose of allowing a resident who has been diagnosed as terminally ill by his or her physician and surgeon to remain in the facility, or allowing a person who has been diagnosed as terminally ill by his or her physician and surgeon to become a resident of the facility if that person is already receiving hospice services and would continue to receive hospice services without disruption if he or she became a resident, when all of the following conditions are met:
- (1) The facility agrees to retain the terminally ill resident, or accept as a resident the terminally ill person, and to seek a waiver on behalf of the individual, provided the individual has requested the waiver and is capable of deciding to obtain hospice services.

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87455 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)

87455

- (2) The terminally ill resident, or the terminally ill person to be accepted as a resident, has obtained the services of a hospice certified in accordance with federal medicare conditions of participation and licensed pursuant to Chapter 8 (commencing with Section 1725) or Chapter 8.5 (commencing with Section 1745).
- (3) The facility, in the judgment of the department, has the ability to provide care and supervision appropriate to meet the needs of the terminally ill resident or the terminally ill person to be accepted as a resident, and is in substantial compliance with regulations governing the operation of residential care facilities for the elderly.
- (4) The hospice has agreed to design and provide for care, services, and necessary medical intervention related to the terminal illness as necessary to supplement the care and supervision provided by the facility.
- (5) An agreement has been executed between the facility and the hospice regarding the care plan for the terminally ill resident or terminally ill person to be accepted as a resident. The care plan shall designate the primary caregiver, identify other caregivers, and outline the tasks the facility is responsible for performing and the approximate frequency with which they shall be performed. The care plan shall specifically limit the facility's role for care and supervision to those tasks allowed under this chapter..."

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NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.31, 1569.312, 1569.54, 1569.699, 1569.72 and 1569.73, Health and Safety Code.

87456 EVALUATION OF SUITABILITY FOR ADMISSION**87456**

- (a) Prior to accepting a resident for care and in order to evaluate his/her suitability, the facility shall, as specified in this article 8:
- (1) Conduct an interview with the applicant and his responsible person.
 - (2) Perform a pre-admission appraisal.
 - (3) Obtain and evaluate a recent medical assessment.
 - (4) Execute the admissions agreement.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2 and 1569.312, Health and Safety Code.

87457 PRE-ADMISSION APPRAISAL**87457**

- (a) Prior to admission, the prospective resident and his/her responsible person, if any, shall be interviewed by the licensee or the employee responsible for facility admissions.
- (1) Sufficient information about the facility and its services shall be provided to enable all persons involved in the placement to make an informed decision regarding admission.
 - (2) The prospective resident's desires regarding admission, and his/her background, including any specific service needs, medical background and functional limitations shall be discussed.
- (b) No person shall be admitted without his/her consent and agreement, or that of his/her responsible person, if any.
- (c) Prior to admission a determination of the prospective resident's suitability for admission shall be completed and shall include an appraisal of his/her individual service needs in comparison with the admission criteria specified in Section 87455, Acceptance and Retention Limitations.
- (1) The appraisal shall include, at a minimum, an evaluation of the prospective resident's functional capabilities, mental condition and an evaluation of social factors as specified in Sections 87459, Functional Capabilities and 87462, Social Factors.
 - (A) The licensee shall be permitted to use the form LIC 603 (Rev. 6/87), Preplacement Appraisal Information, to document the appraisal.

87457 PRE-ADMISSION APPRAISAL (Continued)**87457**

- (2) Except as provided in Section 87638(g)(3), if an initial appraisal or any reappraisal identifies an individual resident service need which is not being met by the general program of facility services, advice shall then be obtained from a physician, social worker, or other appropriate consultant to determine if the needs can be met by the facility. If so, the licensee and the consultant shall develop a plan of action which shall include:
- (A) Objectives, within a time frame, which relate to the resident's problems and/or unmet needs.
 - (B) Plans for meeting the objectives.
 - (C) Identification of any individuals or agencies responsible for implementing each part of the plan.
 - (D) Method of evaluating progress.
- (3) The prospective resident, or his/her responsible person, if any, shall be involved in the development of the appraisal.
- (A) Repealed by Manual Letter No. CCL-08-01, effective 3/5/08.
- (4) If a needs assessment has already been completed by a placement agency or consultant, this shall be obtained and included in the facility's appraisal.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2 and 1569.312, Health and Safety Code.

87458 MEDICAL ASSESSMENT**87458**

- (a) Prior to a person's acceptance as a resident, the licensee shall obtain and keep on file, documentation of a medical assessment, signed by a physician, made within the last year. The licensee shall be permitted to use the form LIC 602 (Rev. 9/89), Physician's Report, to obtain the medical assessment.
- (b) The medical assessment shall include, but not be limited to:
- (1) A physical examination of the resident indicating the physician's primary diagnosis and secondary diagnosis, if any and results of an examination for communicable tuberculosis, other contagious/infectious diseases or other medical conditions which would preclude care of the person by the facility.
 - (2) Documentation of prior medical services and history and current medical status including, but not limited to height, weight, and blood pressure.

87458 MEDICAL ASSESSMENT (Continued)**87458**

- (3) A record of current prescribed medications, and an indication of whether the medication should be centrally stored, pursuant to Section 87465(h)(1).
 - (4) Identification of physical limitations of the person to determine his/her capability to participate in the programs provided by the licensee, including any medically necessary diet limitations.
 - (5) The determination whether the person is ambulatory or nonambulatory as defined in Section 87101(a) or (n), or bedridden as defined in Section 87455(d). The assessment shall indicate whether nonambulatory status is based upon the resident's physical condition, mental condition or both.
 - (6) Information applicable to the pre-admission appraisal specified in Section 87457, Pre-admission Appraisal.
- (c) The licensee shall obtain an updated medical assessment when required by the Department.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312, 1569.315 and 1569.54, Health and Safety Code.

87459 FUNCTIONAL CAPABILITIES**87459**

- (a) The facility shall assess the person's need for personal assistance and care by determining his/her ability to perform specified activities of daily living. Such activities shall include, but not be limited to:
- (1) Bathing, including need for assistance:
 - (A) In getting in and out of the bath.
 - (B) In bathing one or more parts of the body.
 - (C) Through use of grab bars.
 - (2) Dressing and grooming, including the need for partial or complete assistance.
 - (3) Toileting, including the need for:
 - (A) Assistance equipment.
 - (B) Assistance of another person.

87459	FUNCTIONAL CAPABILITIES (Continued)	87459
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- (4) Transferring, including the need for assistance in moving in and out of a bed or chair.
- (5) Continence, including:
 - (A) Bowel and bladder control.
 - (B) Whether assistive devices such as a catheter are used.
- (6) Eating, including the need for:
 - (A) Adaptive devices.
 - (B) Assistance from another person.
- (7) Physical condition, including:
 - (A) Vision.
 - (B) Hearing.
 - (C) Speech.
 - (D) Walking with or without equipment or other assistance.
 - (E) Dietary limitations.
 - (F) Medical history and problems.
 - (G) Need for prescribed medications.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.31, 1569.312 and 1569.315, Health and Safety Code.

87461 MENTAL CONDITIONS**87461**

- (a) The facility shall determine the amount of supervision necessary by assessing the mental status of the prospective resident to determine if the individual:
- (1) tends to wander;
 - (2) is confused or forgetful;
 - (3) is capable of managing his/her own cash resources;
 - (4) actively participates in social activities or is withdrawn;
 - (5) has a documented history of behaviors which may result in harm to self or others.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312 and 1569.316, Health and Safety Code.

87462 SOCIAL FACTORS**87462**

The facility shall obtain sufficient information about each person's likes and dislikes and interests and activities, to determine if the living arrangements in the facility will be satisfactory, and to suggest the program of activities in which the individual may wish to participate.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31 and 1569.312, Health and Safety Code.

87463 REAPPRAISALS**87463**

- (a) The pre-admission appraisal shall be updated, in writing as frequently as necessary to note significant changes and to keep the appraisal accurate. The reappraisals shall document changes in the resident's physical, medical, mental, and social condition. Significant changes shall include but not be limited to:
- (1) A physical trauma such as a heart attack or stroke.
 - (2) A mental/social trauma such as the loss of a loved one.
 - (3) Any illness, injury, trauma, or change in the health care needs of the resident that results in a circumstance or condition specified in Section 87455(c) or 87615, Prohibited Health Conditions.
- (b) The licensee shall immediately bring any such changes to the attention of the resident's physician and his family or responsible person.

87463 REAPPRAISALS (Continued)**87463**

- (c) The licensee shall arrange a meeting with the resident, the resident's representative, if any, appropriate facility staff, and a representative of the resident's home health agency, if any, when there is significant change in the resident's condition, or once every 12 months, whichever occurs first, as specified in Section 87467, Resident Participation in Decision Making.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.156, 1569.2, 1569.31, 1569.312 and 1569.315, Health and Safety Code.

87464 BASIC SERVICES**87464**

- (a) The services provided by the facility shall be conducted so as to continue and promote, to the extent possible, independence and self-direction for all persons accepted for care. Such persons shall be encouraged to participate as fully as their conditions permit in daily living activities both in the facility and in the community.
- (b) As used in this chapter, basic services are those services required to be provided in order to obtain and maintain a license.
- (c) The admission agreement shall specify which of the basic services are desired and/or needed by, and will be provided for, each resident.
- (d) A facility need not accept a particular resident for care. However, if a facility chooses to accept a particular resident for care, the facility shall be responsible for meeting the resident's needs as identified in the pre-admission appraisal specified in Section 87457, Pre-admission Appraisal and providing the other basic services specified below, either directly or through outside resources.
- (e) If the resident is an SSI/SSP recipient, then the basic services shall be provided and/or made available at the basic rate at no additional charge to the resident.
- (1) This shall not preclude the acceptance by the facility of voluntary contributions from relatives or others on behalf of an SSI/SSP recipient.

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- (A) The Social Security Administration has interpreted Federal Regulations (20 CFR 416.1102, 416.1103, and 416.1145) to mean that any contribution given directly to the facility on behalf of an SSI/SSP recipient will not count as income (i.e., will not reduce the recipient's SSI/SSP check) if the payment is used for items other than food, clothing or shelter (e.g., care and supervision).

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- (2) An extra charge to the resident shall be allowed for a private room if a double room is made available but the resident prefers a private room, provided the arrangement is documented in the admissions agreement and the charge is limited to 10% of the Board and Room portion of the SSI/SSP grant.

87464 BASIC SERVICES (Continued)**87464**

- (3) An extra charge to the resident shall be allowed for provision of special food services or products beyond that specified in (f)(2) below, when the resident wishes to purchase the services and agrees to the extra charge in the admission agreement.
- (f) Basic services shall at a minimum include:
- (1) Care and supervision as defined in Section 87101(c)(3) and Health and Safety Code section 1569.2(c).

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Health and Safety Code section 1569.2(c) provides:

(c) "Care and supervision" means the facility assumes responsibility for, or provides or promises to provide in the future, ongoing assistance with activities of daily living without which the resident's physical health, mental health, safety, or welfare would be endangered. Assistance includes assistance with taking medications, money management, or personal care.

HANDBOOK ENDS HERE

- (2) Safe and healthful living accommodations and services, as specified in Section 87307, Personal Accommodations and Services.
- (3) Three nutritionally well-balanced meals and snacks made available daily, including low salt or other modified diets prescribed by a doctor as a medical necessity, as specified in Section 87555, General Food Service Requirements.
- (4) Personal assistance and care as needed by the resident and as indicated in the pre-admission appraisal, with those activities of daily living such as dressing, eating, bathing and assistance with taking prescribed medications, as specified in Section 87608, Postural Supports.
- (5) Regular observation of the resident's physical and mental condition, as specified in Section 87466, Observation of the Resident.
- (6) Arrangements to meet health needs, including arranging transportation, as specified in Section 87465, Incidental Medical and Dental Care Services.
- (7) A planned activities program which includes social and recreational activities appropriate to the interests and capabilities of the resident, as specified in Section 87219, Planned Activities.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312 and 1569.313, Health and Safety Code; and Sections 11006.9 and 12350, Welfare and Institutions Code

87465 INCIDENTAL MEDICAL AND DENTAL CARE SERVICES**87465**

- (a) A plan for incidental medical and dental care shall be developed by each facility. The plan shall encourage routine medical and dental care and provide for assistance in obtaining such care, by compliance with the following:
- (1) The licensee shall arrange, or assist in arranging, for medical and dental care appropriate to the conditions and needs of residents.
 - (2) The licensee shall provide assistance in meeting necessary medical and dental needs. This includes transportation which may be limited to the nearest available medical or dental facility which will meet the resident's need. In providing transportation the licensee shall do so directly or make arrangements for this service.
 - (3) There shall be arrangements for separation and care of residents whose illness requires separation from others.
 - (4) When residents require prosthetic devices, vision and hearing aids, the staff shall be familiar with the use of these devices, and shall assist such persons with their utilization as needed.
 - (5) The licensee shall assist residents with self-administered medications as needed.
 - (6) Facility staff, except those authorized by law, shall not administer injections, but staff designated by the licensee may assist persons with self-administration as needed. Assistance with self-administered medications shall be limited to the following:
 - (A) Medications usually prescribed for self-administration which have been authorized by the person's physician.
 - (B) Medications during an illness determined by a physician to be temporary and minor.
 - (C) Assistance required because of tremor, failing eyesight and similar conditions.
 - (D) Assistance with self-administration does not include forcing a resident to take medication, hiding or camouflaging medications in other substances without the resident's knowledge and consent, or otherwise infringing upon a resident's right to refuse to take a medication.
 - (7) When requested by the prescribing physician or the Department, a record of dosages of medications which are centrally stored shall be maintained by the facility.

87465 INCIDENTAL MEDICAL AND DENTAL CARE SERVICES (Continued) 87465

- (8) There shall be adequate privacy for first aid treatment of minor injuries and for examination by a physician if required.
- (9) If a facility has no medical unit on the grounds, a complete first aid kit shall be maintained and be readily available in a specific location in the facility. The kit shall be a general type approved by the American Red Cross, or shall contain at least the following:
 - (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency.
 - (B) Sterile first aid dressings.
 - (C) Bandages or roller bandages.
 - (D) Scissors.
 - (E) Tweezers.
 - (F) Thermometers.
- (b) If the resident's physician has stated in writing that the resident is able to determine and communicate his/her need for a prescription or nonprescription PRN medication, facility staff shall be permitted to assist the resident with self-administration of his/her PRN medication.
- (c) If the resident's physician has stated in writing that the resident is unable to determine his/her own need for nonprescription PRN medication but can communicate his/her symptoms clearly, facility staff designated by the licensee shall be permitted to assist the resident with self-administration, provided all of the following requirements are met:
 - (1) There is written direction from a physician, on a prescription blank, specifying the name of the resident, the name of the medication, all of the information in Section 87465(e), instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication when the physician should be contacted for a medication reevaluation.
 - (2) Once ordered by the physician the medication is given according to the physician's directions.

87465 INCIDENTAL MEDICAL AND DENTAL CARE SERVICES (Continued) 87465

- (3) A record of each dose is maintained in the resident's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the resident's response.
- (d) If the resident is unable to determine his/her own need for a prescription or nonprescription PRN medication, and is unable to communicate his/her symptoms clearly, facility staff designated by the licensee, shall be permitted to assist the resident with self-administration provided all of the following requirements are met:
 - (1) Facility staff shall contact the resident's physician prior to each dose, describe the resident's symptoms, and receive direction to assist the resident in self-administration of that dose of medication.
 - (2) The date and time of each contact with the physician, and the physician's directions, shall be documented and maintained in the resident's facility record.
 - (3) The date and time the PRN medication was taken, the dosage taken, and the resident's response shall be documented and maintained in the resident's facility record.
- (e) For every prescription and nonprescription PRN medication for which the licensee provides assistance there shall be a signed, dated written order from a physician, on a prescription blank, maintained in the residents file, and a label on the medication. Both the physician's order and the label shall contain at least all of the following information.
 - (1) The specific symptoms which indicate the need for the use of the medication.
 - (2) The exact dosage.
 - (3) The minimum number of hours between doses.
 - (4) The maximum number of doses allowed in each 24-hour period.
- (f) Emergency care requirements shall include the following:
 - (1) The name, address, and telephone number of each resident's physician and dentist shall be readily available to that resident, the licensee, and facility staff.
 - (2) The name, address and telephone number of each emergency agency to be called in the event of an emergency, including but not limited to the fire department, crisis center or paramedical unit or medical resource, shall be posted in a location visible to both staff and residents.

87465 INCIDENTAL MEDICAL AND DENTAL CARE SERVICES (Continued) 87465

- (3) The name and telephone number of an ambulance service shall be readily available.
- (4) Renumbered to Section 87411(c)(1) by Manual Letter No. CCL-08-01, effective 3/5/08.
- (g) The licensee shall immediately telephone 9-1-1 if an injury or other circumstance has resulted in an imminent threat to a resident's health including, but not limited to, an apparent life-threatening medical crisis except as specified in Section 87469(c)(2), (c)(3), or (c)(4).
- (h) The following requirements shall apply to medications which are centrally stored:
 - (1) Medications shall be centrally stored under the following circumstances:
 - (A) The preservation of medicines requires refrigeration, if the resident has no private refrigerator.
 - (B) Any medication is determined by the physician to be hazardous if kept in the personal possession of the person for whom it was prescribed.
 - (C) Because of potential dangers related to the medication itself, or due to physical arrangements in the facility and the condition or the habits of other persons in the facility, the medications are determined by either a physician, the administrator, or Department to be a safety hazard to others.
 - (2) Centrally stored medicines shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.
 - (3) Each container shall carry all of the information specified in (6)(A) through (E) below plus expiration date and number of refills.
 - (4) All centrally stored medications shall be labeled and maintained in compliance with state and federal laws. No persons other than the dispensing pharmacist shall alter a prescription label.
 - (5) Each resident's medication shall be stored in its originally received container. No medications shall be transferred between containers.
 - (6) The licensee shall be responsible for assuring that a record of centrally stored prescription medications for each resident is maintained for at least one year and includes:
 - (A) The name of the resident for whom prescribed.
 - (B) The name of the prescribing physician.
 - (C) The drug name, strength and quantity.

87465	INCIDENTAL MEDICAL AND DENTAL CARE SERVICES (Continued)	87465
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- (D) The date filled.
 - (E) The prescription number and the name of the issuing pharmacy.
 - (F) Instructions, if any, regarding control and custody of the medication.
- (i) Prescription medications which are not taken with the resident upon termination of services, not returned to the issuing pharmacy, nor retained in the facility as ordered by the resident's physician and documented in the resident's record nor disposed of according to the hospice's established procedures or which are otherwise to be disposed of shall be destroyed in the facility by the facility administrator and one other adult who is not a resident. Both shall sign a record, to be retained for at least three years, which lists the following:
- (1) Name of the resident.
 - (2) The prescription number and the name of the pharmacy.
 - (3) The drug name, strength and quantity destroyed.
 - (4) The date of destruction.
- (j) In all facilities licensed for sixteen (16) persons or more, one or more employees shall be designated as having primary responsibility for assuring that each resident receives needed first aid and needed emergency medical services and for assisting residents as needed with self-administration of medications. The names of the staff employees so responsible and the designated procedures shall be documented and made known to all residents and staff.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312 and 1569.73, Health and Safety Code.

87466	OBSERVATION OF THE RESIDENT	87466
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The licensee shall ensure that residents are regularly observed for changes in physical, mental, emotional and social functioning and that appropriate assistance is provided when such observation reveals unmet needs. When changes such as unusual weight gains or losses or deterioration of mental ability or a physical health condition are observed, the licensee shall ensure that such changes are documented and brought to the attention of the resident's physician and the resident's responsible person, if any.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31 and 1569.312, Health and Safety Code.

87467 RESIDENT PARTICIPATION IN DECISIONMAKING**87467**

- (a) Prior to, or within two weeks of the resident's admission, the licensee shall arrange a meeting with the resident, the resident's representative, if any, appropriate facility staff, and a representative of the resident's home health agency, if any, and any other appropriate parties, to prepare a written record of the care the resident will receive in the facility, and the resident's preferences regarding the services provided at the facility.
- (1) At a minimum the written record shall include the date of the meeting, name of individuals who participated and their relationship to the resident, and the agreed-upon services to be provided to the resident.
 - (2) If the resident has a regular physician, the licensee shall send a copy of the record to the physician.
 - (3) The licensee shall arrange a meeting with the resident and appropriate individuals identified in Section 87467(a)(1) to review and revise the written record as specified, when there is a significant change in the residents condition, or once every 12 months, whichever occurs first. Significant changes shall include, but not be limited to occurrences specified in Section 87463, Reappraisals.
 - (4) The meeting and documentation described in this section may be used to satisfy the reappraisal requirements of Section 87463, Reappraisals.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.156 and 1569.80, Health and Safety Code.

87468 PERSONAL RIGHTS OF RESIDENTS**87468**

- (a) Residents in residential care facilities for the elderly shall have personal rights which include, but are not limited to, those listed in Sections 87468.1, Personal Rights of Residents in All Facilities, and 87468.2, Additional Personal Rights of Residents in Privately Operated Facilities, as applicable to the facility.
- (1) "Privately operated facility" means a residential care facility for the elderly that is licensed to an individual, firm, partnership, association, or corporation.
 - (2) "Publicly operated facility" means a residential care facility for the elderly that is licensed to a city, county, or other government entity.

87468 PERSONAL RIGHTS OF RESIDENTS (Continued)**87468**

- (b) At the time the admission agreement is signed, a resident and the resident's representative shall be personally advised of and given a copy of:
- (1) The personal rights of residents specified in Sections 87468.1, Personal Rights of Residents in All Facilities or and 87468.2, Additional Personal Rights of Residents in Privately Operated Facilities, as applicable to the facility.
 - (A) The licensee shall have each resident and the resident's representative sign a copy of these rights, and the signed copy shall be included in the resident's record.
 - (2) A nondiscrimination notice.
 - (A) The notice shall read "[Name of facility] does not discriminate and does not permit discrimination, including, but not limited to, bullying, abuse, or harassment, on the basis of actual or perceived sexual orientation, gender identity, gender expression, or HIV status, or based on association with another individual on account of that individual's actual or perceived sexual orientation, gender identity, gender expression, or HIV status. You may file a complaint with the Office of the State Long-Term Care Ombudsman [provide contact information] if you believe that you have experienced this kind of discrimination."
 - (B) The licensee shall have each resident and the resident's representative sign a copy of this notice, and the signed copy shall be included in the resident's record.
- (c) Licensees shall prominently post personal rights, nondiscrimination notice, and complaint information in areas accessible to residents, representatives, and the public.
- (1) The personal rights of residents specified in Sections 87468.1, Personal Rights of Residents in All Facilities and 87468.2, Additional Personal Rights of Residents in Privately Operated Facilities shall be posted as applicable to the facility.
 - (2) Information on the appropriate reporting agency in case of a complaint or emergency, including procedures for filing confidential complaints, shall be posted as follows:
 - (A) Licensees may use the Residential Care Facility for the Elderly (RCFE) Complaint Poster (PUB 475) or may develop their own poster as provided in this section. A poster developed by the licensee shall contain the same content as the PUB 475. The poster that is posted shall be 20" x 26" in size and be posted in the main entryway of the facility. PUB 475 may be accessed, downloaded, and printed from the www.cclid.ca.gov website.

87468 PERSONAL RIGHTS OF RESIDENTS (Continued)**87468**

- (d) Licensees shall post the personal rights, nondiscrimination notice, and complaint information specified above in English, and, in any other language in which at least five (5) percent of the residents can only read that other language.
- (e) At the request of the Department, and immediately if the request is made during an inspection, a licensee shall provide the Department with a confidential list of residents that includes the language(s) read by each resident, which is to be kept confidential to the extent permitted by law. This list shall be maintained in an accurate and current status at all times.

NOTE: Authority cited: Section 1569.30 and 1569.318, Health and Safety Code. Reference: Sections 1439.51, 1569.1, 1569.265, 1569.267, 1569.269, 1569.31, 1569.312, 1569.33 and 1569.889, Health and Safety Code.

87468.1 PERSONAL RIGHTS OF RESIDENTS IN ALL FACILITIES**87468.1**

- (a) Residents in all residential care facilities for the elderly shall have all of the following personal rights:
 - (1) To be accorded dignity in their personal relationships with staff, residents, and other persons.
 - (2) To be accorded safe, healthful and comfortable accommodations, furnishings and equipment.
 - (3) To be free from punishment, humiliation, intimidation, abuse, or other actions of a punitive nature, such as withholding residents' money or interfering with daily living functions such as eating, sleeping, or elimination.
 - (4) To be informed by the licensee of the provisions of law regarding complaints and of procedures for confidentially registering complaints, including, but not limited to, the address and telephone number for the complaint receiving unit of the Department, and how to contact the Community Care Licensing Division of the California Department of Social Services, and the long-term care ombudsman regarding grievances in regard to the facility.
 - (5) To have the freedom to attend religious services or activities of their choice either in or outside the facility and to have visits from the spiritual advisor of their choice. Attendance at religious services, either in or outside the facility, shall be on a completely voluntary basis.
 - (6) To leave or depart the facility at any time and to not be locked into any room, building, or on facility premises by day or night. This does not prohibit a licensee from establishing house rules, such as locking doors at night to protect residents, or barring windows against intruders, with permission from the Department.

87468.1 PERSONAL RIGHTS OF RESIDENTS IN ALL FACILITIES (Continued) 87468.1

- (7) To visit the facility prior to residence along with their representatives.
- (8) To have their representatives regularly informed by the licensee of activities related to care or services, including ongoing evaluations, as appropriate to their needs.
- (9) To have communications to the licensee from their representatives answered promptly and appropriately.
- (10) To be informed of the licensee's policy concerning visits and other communications with residents, according to Health and Safety Code section 1569.313.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.313 provides:

"Each residential care facility for the elderly shall state, on its client information form or admission agreement, and on its patient's rights form, the facility's policy concerning family visits and other communication with resident clients and shall promptly post notice of its visiting policy at a location in the facility that is accessible to residents and families.

The facility's policy concerning family visits and communication shall be designed to encourage regular family involvement with the resident client and shall provide ample opportunities for family participation in activities at the facility."

HANDBOOK ENDS HERE

- (11) To have their visitors, including ombudspersons and advocacy representatives, permitted to visit privately during reasonable hours and without prior notice, provided that the rights of other residents are not infringed upon.
- (12) To wear their own clothes; to keep and use their own personal possessions, including their toilet articles; and to keep and be allowed to spend their own money.
- (13) To have access to individual storage space for private use.
- (14) To have reasonable access to telephones, to both make and receive confidential calls. The licensee may require reimbursement for long distance calls.
- (15) To send and receive unopened correspondence in a prompt manner.
- (16) To receive or reject medical care or other services.
- (17) To receive assistance in exercising the right to vote.
- (18) To move from the facility.

87468.1 PERSONAL RIGHTS OF RESIDENTS IN ALL FACILITIES (Continued) 87468.1

- (b) All residents in all residential care facilities for the elderly shall be protected from all of the actions specified in this subsection. A licensee or facility staff may not take any of the following actions, which also includes taking these actions wholly or partially on the basis of the actual or perceived sexual orientation, gender identity, gender expression, or human immunodeficiency virus (HIV) status, of a resident:
- (1) Deny admission to a facility, transfer or refuse to transfer a resident within the facility or to another facility, or discharge or evict a resident from a facility.
 - (2) Deny a request by residents to share a room.
 - (3) Where rooms are assigned by gender, assign, reassign, or refuse to assign, a room to a resident who is transgender other than according to the resident's gender identity, unless at the request of the resident who is transgender.
 - (4) Prohibit a resident from using, or harass a resident who seeks to use or uses, a restroom available to others of the same gender identity, regardless of whether the resident is making a gender transition or appears to be gender-nonconforming. Harassment includes, but is not limited to, requiring a resident to show identity documents to gain entrance to a restroom available to other persons of the same gender identity.
 - (5) Willfully and repeatedly fail to use a resident's preferred name or pronouns after being informed of the resident's preferred name or pronouns in a clear manner.
 - (6) Deny a resident the right to wear or be dressed in clothing, accessories, or cosmetics permitted for any other resident.
 - (7) Restrict a resident's right to associate with other residents or with visitors, including the right to consensual sexual relations.
 - (A) A licensee is not precluded from restricting or banning sexual relations as long as the restriction or ban is applied uniformly to all residents in a nondiscriminatory manner. All residents and their representatives, including potential residents prior to the time of signing the admission agreement, shall be notified in writing of any such facility restriction or ban.
 - (8) Deny or restrict medical or nonmedical care that is appropriate to a resident's organs and bodily needs, or provide medical or nonmedical care to the resident in a manner that, to a similarly situated reasonable person, unduly demeans the resident's dignity or causes avoidable discomfort.

87468.1 PERSONAL RIGHTS OF RESIDENTS IN ALL FACILITIES (Continued) 87468.1

(c) The provisions of subsection (b) shall not apply to the extent that they are incompatible with the professionally reasonable clinical judgment of a medical professional.

(d) The Department does not have the authority to waive the personal rights specified in subsection (b).

NOTE: Authority cited: Section 1569.30 and 1569.318, Health and Safety Code. Reference: Sections 1439.51, 1569.1, 1569.31, 1569.312 and 1569.313, Health and Safety Code.

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES****87468.2**

- (a) In addition to the rights listed in Section 87468.1, Personal Rights of Residents in All Facilities, residents in privately operated residential care facilities for the elderly shall have all of the following personal rights:
- (1) To have a reasonable level of personal privacy in accommodations, medical treatment, personal care and assistance, visits, communications, telephone conversations, use of the Internet, and meetings of resident and family groups.
 - (2) To have their records and personal information remain confidential and to approve their release, except as authorized by law.
 - (3) To be encouraged and assisted in exercising their rights as citizens and as residents of the facility. Residents shall be free from interference, coercion, discrimination, and retaliation in exercising their rights.
 - (4) To care, supervision, and services that meet their individual needs and are delivered by staff that are sufficient in numbers, qualifications, and competency to meet their needs.
 - (5) To be served food of the quality and quantity necessary to meet their nutritional needs.
 - (6) To make choices concerning their daily lives in the facility.
 - (7) To fully participate in planning their care, including the right to attend and participate in meetings or communications regarding care and services to be provided, according to Health and Safety Code section 1569.80 and involve persons of their choice in this planning. The licensee shall provide necessary information and support to ensure that residents direct the planning of their care to the maximum extent possible, and are enabled to make informed decisions and choices.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.80 provides:

- "(a) A resident of a residential care facility for the elderly, or the resident's representative, or both, shall have the right to participate in decisionmaking regarding the care and services to be provided to the resident. Accordingly, prior to, or within two weeks after, the resident's admission, the facility shall coordinate a meeting with the resident and the resident's representative, if any, an appropriate member or members of the facility's staff, if the resident is receiving home health services in the facility, a representative of the home health agency involved, and any other appropriate parties. The facility shall ensure that participants in the meeting prepare a written record of the care the resident will receive in the facility, and the resident's preferences regarding the services provided at the facility.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (b) Once prepared, the written record described in subdivision (a) shall be used by the facility, and, if applicable pursuant to Section 1569.725, the home health agency, to determine the care and services provided to the resident. If the resident has a regular physician, the written record shall be sent by the facility to that physician.
- (c) The written record described in subdivision (a) shall be reviewed, and, if necessary, revised, at least once every 12 months, or upon a significant change in the resident's condition, as defined by regulations, whichever occurs first. The review shall take place at a meeting coordinated by the facility, and attended by the resident, the resident's representative, if any, an appropriate member or members of the facility's staff, and, if the resident is receiving home health services in the facility, a representative from the home health agency involved.
- (d) This section shall not preclude a residential care facility for the elderly or home health agency from satisfying other state or federal obligations at a meeting required by subdivision (a) or (c).
- (e) If the residential care facility for the elderly is a continuing care retirement community, as defined in paragraph (10) of subdivision (c) of Section 1771, this section shall apply only to residents who require care and supervision, as defined in subdivision (b) of Section 1569.2."

HANDBOOK ENDS HERE

- (8) To be free from neglect, financial exploitation, involuntary seclusion, punishment, humiliation, intimidation, and verbal, mental, physical, or sexual abuse.
- (9) To present grievances and recommend changes in policies, procedures, and services to the facility staff, management, and governing authority, and to any other person without restraint, coercion, discrimination, reprisal, or other retaliatory actions. The licensee shall respond to residents' grievances and recommendations promptly.
- (10) To contact the State Department of Social Services, the long-term care ombudsman, or both, regarding grievances in regard to the licensee. The licensee shall post the telephone numbers and addresses for the local offices of the State Department of Social Services and ombudsman program, according to Section 9718 of the Welfare and Institutions Code, conspicuously in the facility foyer, lobby, residents' activity room, or other location easily accessible to residents and their representatives.

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

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Welfare and Institutions Code section 9718 provides:

"Every long-term care facility, as defined in subdivision (b) of Section 9701, shall post in a conspicuous location a notice of the name, address, and phone number of the office and the nearest approved organization, and a brief description of the services provided by the office and the approved organization. The form of the notice shall be approved by the office."

HANDBOOK ENDS HERE

- (11) To be fully informed, prior to or at the time of admission, of all rules that govern resident conduct and responsibilities while living at the facility, as evidenced by the resident's written acknowledgement. All rules established by a licensee shall be reasonable and not violate any rights in this section or other applicable laws or regulations, according to Health and Safety Code section 1569.885.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.885 provides:

- "(a) When referring to a resident's obligation to observe facility rules, the admission agreement shall indicate that the rules must be reasonable, and that there is a facility procedure for suggesting changes in the rules. A facility rule shall not violate any right set forth in this article or in other applicable laws and regulations.
- (b) The admission agreement shall specify that a copy of the facility grievance procedure for resolution of resident complaints about facility practices shall be made available to the resident or his or her representative.
- (c) The admission agreement shall inform a resident of the right to contact the State Department of Social Services, the long-term care ombudsman, or both, regarding grievances against the facility.
- (d) A copy of any applicable resident's rights specified by law or regulation shall be an attachment to all admission agreements.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (e) The statement of resident's rights attached to admissions agreements by a residential care facility for the elderly shall include information on the reporting of suspected or known elder and dependent adult abuse, as set forth in Section 1569.889."

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- (12) To receive in the admission agreement a comprehensive description of the method for evaluating residents' service needs and the fee schedule for the items and services, and to receive written notice of any rate increases according to Health and Safety Code sections 1569.655 and 1569.884.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.655 provides:

- "(a) If a licensee of a residential care facility for the elderly increases the rates of fees for residents or makes increases in any of its rate structures for services, the licensee shall provide no less than 60 days' prior written notice to the residents or the residents' representatives setting forth the amount of the increase, the reason for the increase, and a general description of the additional costs, except for an increase in the rate due to a change in the level of care of the resident. This subdivision shall not apply to optional services that are provided by individuals, professionals, or organizations under a separate fee-for-service arrangement with residents.
- (b) No licensee shall charge nonrecurring lump-sum assessments. The notification requirements contained in subdivision (a) shall apply to increases specified in this subdivision. For purposes of this subdivision, "nonrecurring lump-sum assessments" mean rate increases due to unavoidable and unexpected costs that financially obligate the licensee. In lieu of the lump-sum payment, all increases in rates shall be to the monthly rate amortized over a 12-month period. The prohibition against a lump-sum assessment shall not apply to charges for specific goods or services provided to an individual resident.
- (c) If a licensee increases rates for a recipient under the State Supplementary Program for the Aged, Blind and Disabled, described in Article 5 (Commencing with Section 12200) of Chapter 3 of Part 3 of Division 9 of the Welfare and Institutions Code, the licensee shall meet the requirements for SSI/SSP rate increases, as prescribed by law.
- (d) This section shall not apply to licensees of residential care facilities for the elderly that have obtained a certificate of authority to offer continuing care contracts, as defined in paragraph (5) of subdivision (c) of Section 1771."

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

Health and Safety Code section 1569.884 provides:

"The admission agreement shall include all of the following:

- (a) A comprehensive description of any items and services provided under a single fee, such as a monthly fee for room, board, and other items and services.
- (b) A comprehensive description of, and the fee schedule for, all items and services not included in a single fee. In addition, the agreement shall indicate that the resident shall receive a monthly statement itemizing all separate charges incurred by the resident.
- (c) A facility may assess a separate charge for an item or service only if that separate charge is authorized by the admission agreement. If additional services are available through the facility to be purchased by the resident that were not available at the time the admission agreement was signed, a list of these services and charges shall be provided to the resident or the resident's representative. A statement acknowledging the acceptance or refusal to purchase the additional services shall be signed and dated by the resident or the resident's representative and attached to the admission agreement.
- (d) An explanation of the use of third-party services within the facility that are related to the resident's service plan, including, but not limited to, ancillary, health, and medical services, how they may be arranged, accessed, and monitored, any restrictions on third-party services, and who is financially responsible for the third-party services.
- (e) A comprehensive description of billing and payment policies and procedures.
- (f) The conditions under which rates may be increased pursuant to Section 1569.655.
- (g) The facility's policy concerning family visits and other communication with residents, pursuant to Section 1569.313.
- (h) The facility's policy concerning refunds, including the conditions under which a refund for advanced monthly fees will be returned in the event of a resident's death, pursuant to Section 1569.652.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (i) Conditions under which the agreement may be terminated.
- (j) An explanation of the facility's responsibility to prepare a relocation evaluation, for each resident and a closure plan and to provide notice in the case of an eviction pursuant to Section 1569.682."

HANDBOOK ENDS HERE

- (13) To be informed in writing prior to or at the time of admission, of any resident retention limitations set by the state or licensee, including any limitations or restrictions on the licensee's ability to meet residents' needs.
- (14) To reasonable accommodation of their individual needs and preferences in all aspects of life in the facility, except when accommodation would endanger the health or safety of the individual resident or other residents.
- (15) To reasonable accommodation of their preferences concerning room and roommate choices.
- (16) To written notice of any room changes at least 30 days in advance unless a room change is agreed to by the resident, required to fill a vacant bed, or necessary due to an emergency.
- (17) To share a room with their spouse, domestic partner, or a person of their choice when both spouses, partners, or residents live in the facility and both consent to the arrangement.
- (18) To select their own physicians, pharmacies, privately paid personal assistants, hospice agency, and health care providers in a manner that is consistent with the resident's admission agreement or other rules of the facility, and according to these personal rights.
- (19) To have prompt access to review all of their records and to purchase photocopies of their records. Photocopied records shall be provided within two (2) business days and at a cost that does not exceed the community standard for photocopies.
- (20) To be protected from involuntary transfers, discharges, and evictions. A licensee shall not involuntarily transfer or evict residents for reasons other than those permitted by state law or regulations and shall comply with all eviction and relocation protections for residents. For purposes of this paragraph, "involuntary" means a transfer, discharge, or eviction that is initiated by the licensee, not by the resident.
- (21) To consent to have their relatives and other individuals of their choosing visit during reasonable hours, privately, and without prior notice.

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

- (22) To receive written information on the right to establish an advance health care directive and the licensee's written policies on honoring an advance health care directive according to Health and Safety Code section 1569.156.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.156 provides:

"(a) A residential care facility for the elderly shall do all of the following:

- (1) Not condition the provision of care or otherwise discriminate based on whether or not an individual has executed an advance directive, consistent with applicable laws and regulations.
 - (2) Provide education to staff on issues concerning advance directives.
 - (3) Provide written information, upon admission, about the right to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment and the right, under state law, to formulate advance directives.
 - (4) Provide written information about policies of the facility regarding the implementation of the rights described in paragraph (3).
- (b) For purposes of this section, "advance directive" means an "advance health care directive," as defined in Section 4605 of the Probate Code, or some other form of instruction recognized under state law specifically addressing the provision of health care."

HANDBOOK ENDS HERE

- (23) To be encouraged to develop and maintain their fullest potential for independent living through participation in activities designed and implemented for this purpose, according to Section 87219.
- (24) To organize and participate in a resident council established according to Health and Safety Code section 1569.157.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.157 provides:

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- "(a) Every licensed residential care facility for the elderly, at the request of two or more residents, shall assist the residents in establishing and maintaining a single resident council at the facility. The resident council shall be composed of residents of the facility. Family members, resident representatives, advocates, long-term care ombudsman program representatives, facility staff, or others may participate in resident council meetings and activities at the invitation of the resident council.
- (b) A resident council may, among other things, make recommendations to facility administrators to improve the quality of daily living and care in the facility and to promote and protect residents' rights.
- (c) If a resident council submits written concerns or recommendations, the facility shall respond in writing regarding any action or inaction taken in response to those concerns or recommendations within 14 calendar days.
- (d) Facility policies on resident councils shall not limit the right of residents to meet independently with outside persons or facility personnel.
- (e) Each resident council member shall be informed by the facility of his or her right to be interviewed as part of the regulatory inspection process.
- (f) Facilities shall promote resident councils as follows:
- (1) If a facility has a resident council, the facility shall inform new residents of the existence of the resident council. The facility shall also provide information on the time, place, and dates of resident council meetings and the resident representative to contact regarding involvement in the resident council.
 - (2) If a facility has a resident council and a licensed capacity of 16 or more, the facility shall appoint a designated staff liaison to assist the resident council, make a room available for resident council meetings, and post meeting information in a central location readily accessible to residents, relatives, and resident representatives.
 - (3) If a facility does not have a resident council, upon admission, the facility shall provide written information on the resident's right to form a resident council to the resident and the resident representative, as indicated in the admissions agreement.
 - (4) Upon request, and with the permission of the resident council, the facility shall share the name and contact information of the designated representative of the resident council with the long-term care ombudsman program.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (g) A facility shall not willfully interfere with the formation, maintenance, or promotion of a resident council, or its participation in the regulatory inspection process. For the purposes of this subdivision, willful interference shall include, but not be limited to, discrimination or retaliation in any way against an individual as a result of his or her participation in a resident council, refusal to publicize resident council meetings or provide appropriate space for either meetings or a bulletin board, or failure to respond to written requests by the resident council in a timely manner.
- (h) The text of this section with the heading "Rights of Resident Councils" shall be posted in a prominent place at the facility accessible to residents, family members, and resident representatives.
- (i) A violation of this section shall not be subject to the provisions of Section 1569.40. A violation of this section shall constitute a violation of resident rights. A facility that violates this section shall be subject to a daily civil penalty of two hundred fifty dollars (\$250) until the violation is corrected. A violation shall be deemed to have been corrected on the date the facility submits documentation of the correction to the department if the correction is verified by the department."

HANDBOOK ENDS HERE

- (25) To protection of their property from theft or loss according to Health and Safety Code sections 1569.152, 1569.153, and 1569.154.

HANDBOOK BEGINS HERE

Health and Safety Code section 1569.152 provides:

- "(a) A residential care facility for the elderly, as defined in Section 1569.2, which fails to make reasonable efforts to safeguard resident property shall reimburse a resident for or replace stolen or lost resident property at its then current value. The facility shall be presumed to have made reasonable efforts to safeguard resident property if the facility has shown clear and convincing evidence of its efforts to meet each of the requirements specified in Section 1569.153. The presumption shall be a rebuttable presumption, and the resident or the resident's representative may pursue this matter in any court of competent jurisdiction.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (b) A civil penalty shall be levied if the residential care facility for the elderly has no program in place or if the facility has not shown clear and convincing evidence of its efforts to meet all of the requirements set forth in Section 1569.153. The State Department of Social Services shall issue a deficiency in the event that the manner in which the policies have been implemented is inadequate or the individual facility situation warrants additional theft and loss protections.
- (c) The department shall not determine that a facility's program is inadequate based solely on the occasional occurrence of theft or loss in a facility."

Health and Safety Code section 1569.153 provides:

"A theft and loss program shall be implemented by the residential care facilities for the elderly within 90 days after January 1, 1989. The program shall include all of the following:

- (a) Establishment and posting of the facility's policy regarding theft and investigative procedures.
- (b) Orientation to the policies and procedures for all employees within 90 days of employment.
- (c) Documentation of lost and stolen resident property with a value of twenty-five dollars (\$25) or more within 72 hours of the discovery of the loss or theft and, upon request, the documented theft and loss record for the past 12 months shall be made available to the State Department of Social Services, law enforcement agencies and to the office of the State Long-Term Care Ombudsman in response to a specific complaint. The documentation shall include, but not be limited to, the following:
 - (1) A description of the article.
 - (2) Its estimated value.
 - (3) The date and time the theft or loss was discovered.
 - (4) If determinable, the date and time the loss or theft occurred.
 - (5) The action taken.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (d) A written resident personal property inventory is established upon admission and retained during the resident's stay in the residential care facility for the elderly. Inventories shall be written in ink, witnessed by the facility and the resident or resident's representative, and dated. A copy of the written inventory shall be provided to the resident or the person acting on the resident's behalf. All additions to an inventory shall be made in ink, and shall be witnessed by the facility and the resident or resident's representative, and dated. Subsequent items brought into or removed from the facility shall be added to or deleted from the personal property inventory by the facility at the written request of the resident, the resident's family, a responsible party, or a person acting on behalf of a resident. The facility shall not be liable for items which have not been requested to be included in the inventory or for items which have been deleted from the inventory. A copy of a current inventory shall be made available upon request to the resident, responsible party, or other authorized representative. The resident, resident's family, or a responsible party may list those items which are not subject to addition or deletion from the inventory, such as personal clothing or laundry, which are subject to frequent removal from the facility.
- (e) Inventory and surrender of the resident's personal effects and valuables upon discharge to the resident or authorized representative in exchange for a signed receipt.
- (f) Inventory and surrender of personal effects and valuables following the death of a resident to the authorized representative in exchange for a signed receipt. Immediate written notice to the public administrator of the county upon the death of a resident whose heirs are unable or unwilling to claim the property as specified in Chapter 20 (commencing with Section 1140) of Division 3 of the Probate Code.
- (g) Documentation, at least semiannually, of the facility's efforts to control theft and loss, including the review of theft and loss documentation and investigative procedures and results of the investigation by the administrator and, when feasible, the resident council.
- (h) Establishment of a method of marking, to the extent feasible, personal property items for identification purposes upon admission and, as added to the property inventory list, including engraving of dentures and tagging of other prosthetic devices.
- (i) Reports to the local law enforcement agency within 36 hours when the administrator of the facility has reason to believe resident property with a then current value of one hundred dollars (\$100) or more has been stolen. Copies of those reports for the preceding 12 months shall be made available to the State Department of Social Services and law enforcement agencies.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (j) Maintenance of a secured area for residents' property which is available for safekeeping of resident property upon the request of the resident or the resident's responsible party. Provide a lock for the resident's bedside drawer or cabinet upon request of and at the expense of the resident, the resident's family, or authorized representative. The facility administrator shall have access to the locked areas upon request.
- (k) A copy of this section and Sections 1569.152 and 1569.154 is provided by a facility to all of the residents and their responsible parties, and, available upon request, to all of the facility's prospective residents and their responsible parties.
- (l) Notification to all current residents and all new residents, upon admission, of the facility's policies and procedures relating to the facility's theft and loss prevention program.
- (m) Only those residential units in which there are no unrelated residents and where the unit can be secured by the resident or residents are exempt from the requirements of this section."

Health and Safety Code section 1569.154 provides:

"No provision of a contract of admission, which includes all documents which a resident or his or her representative is required to sign at the time of, or as a condition of, admission to a residential care facility for the elderly, shall require or imply a lesser standard of responsibility for the personal property of residents than is required by law."

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- (26) To manage their financial affairs. A licensee shall not require residents to deposit their personal funds with the licensee. Except as provided for in approved continuing care agreements, a licensee, or a spouse, domestic partner, relative, or employee of a licensee, shall not do any of the following:
 - (A) Accept appointment as a guardian or conservator of the person or estate of a resident.
 - (B) Become or act as a representative payee for any payments made to a resident, without the written and documented consent of the resident or the resident's representative.
 - (C) Serve as an agent for a resident under any general or special power of attorney.
 - (D) Become or act as a joint tenant on any account with a resident.

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

- (E) Enter into a loan or promissory agreement or otherwise borrow money from a resident without a notarized written agreement outlining the terms of the repayment being given to the resident.
- (27) To keep, have access to, and use their own personal possessions, including toilet articles, and to keep and be allowed to spend their own money, unless limited by statute or regulation.
- (b) A licensed residential care facility for the elderly shall not discriminate against a person seeking admission or a resident based on the person's or resident's sex, race, color, religion, national origin, marital status, registered domestic partner status, ancestry, actual or perceived sexual orientation, or actual or perceived gender identity.
- (c) No provision of a contract of admission, including all documents that a resident or their representative is required to sign as part of the contract for, or as a condition of, admission to a residential care facility for the elderly, shall require that a resident waive benefits or rights to which they are entitled as specified in these regulations or as provided by federal or other state law or regulation.
- (d) Residents' family members, friends, and representatives have the right to organize and participate in a family council that is established according to Health and Safety Code section 1569.158.

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Health and Safety Code section 1569.158 provides:

- "(a) A residential care facility for the elderly shall not prohibit the formation of a family council. When requested by a member of the resident's family or the resident representative, a family council shall be allowed to meet in a common meeting room of the facility during mutually agreed upon hours.
- (b) Facility policies on family councils shall in no way limit the right of residents and participants in a family council to meet independently with outside persons, including members of nonprofit or government organizations or with facility personnel during nonworking hours.
- (c) "Family council" for the purpose of this section means a meeting of family members, friends, representatives, or agents as defined in Section 14110.8 of the Welfare and Institutions Code of two or more residents to confer in private without facility staff.
- (d) Family councils shall be provided adequate space on a prominent bulletin board or other posting area for the display of meeting notices, minutes, information, and newsletters.
- (e) Facility personnel or visitors may attend a family council meeting only at the family council's invitation.

HANDBOOK CONTINUES

**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

HANDBOOK CONTINUES

- (f) If a family council submits written concerns or recommendations, the facility shall respond in writing regarding any action or inaction taken in response to the concerns or recommendations within 14 calendar days.
- (g) (1) If a facility has a family council, the facility shall include notice of the family council and its meetings to family members and resident representatives in routine mailings and shall inform family members and resident representatives of new and current residents who are identified on the admissions agreement during the admissions process or in the resident's records, of the existence of the family council, the time and place of meetings of the family council, and the name of the family council representative.
- (2) If a facility does not have a family council, the facility shall provide, upon admission of a new resident, written information to the resident's family or resident representative of their right to form a family council.
- (3) Upon request, and with the permission of the family council, the facility shall share the name and contact information of the designated representative of the family council with the long-term care ombudsman program.
- (h) If a facility has a family council and a licensed capacity of 16 or more, the facility shall appoint a designated staff liaison who shall be responsible for providing assistance to the family council and responding to written requests that result from family council meetings.
- (i) A facility shall not willfully interfere with the formation, maintenance, or promotion of a family council, or its participation in the regulatory inspection process. For the purposes of this subdivision, willful interference shall include, but shall not be limited to, discrimination or retaliation in any way against an individual as a result of his or her participation in a family council, refusal to publicize family council meetings or provide appropriate space for meetings or postings as required under this section, or failure to respond to written requests by a family council in a timely manner.
- (j) A violation of this section shall not be subject to the provisions of Section 1569.40. A violation of this section shall constitute a violation of resident rights. A facility that violates this section shall be subject to a daily civil penalty of two hundred fifty dollars (\$250) until the violation is corrected. A violation shall be deemed to have been corrected on the date the facility submits documentation of the correction to the department if the correction is verified by the department."

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**87468.2 ADDITIONAL PERSONAL RIGHTS OF RESIDENTS IN
PRIVATELY OPERATED FACILITIES (Continued)****87468.2**

- (e) The rights specified in this section shall be in addition to any other rights provided by law.
- (f) The Department does not have the authority to waive the personal rights specified in subsection (a).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.152, 1569.153, 1569.154, 1569.156, 1569.157, 1569.261, 1569.265, 1569.267, 1569.269, 1569.31, 1569.312, 1569.655, 1569.80, 1569.884 and 1569.885, Health and Safety Code; and Section 9718, Welfare and Institutions Code.

**87469 ADVANCE DIRECTIVES AND REQUESTS REGARDING RESUSCITATIVE
MEASURES 87469**

- (a) Upon admission, a facility shall provide each resident, and representative or responsible person of each resident, with written information about the right to make decisions concerning medical care. This information shall include, but not be limited to, the Department's approved brochure entitled "Your Right To Make Decisions About Medical Treatment," PUB 325, (3/12) and a copy of Sections 87469(b), (c) and (d) of the regulations.
- (b) Residents shall be permitted to have a Request to Forego Resuscitative Measures, an Advance Health Care Directive and/or a Do-Not-Resuscitate (DNR) Form in their facility file.

87469 ADVANCE DIRECTIVES AND REQUESTS REGARDING RESUSCITATIVE MEASURES (Continued) 87469

- (c) If a resident who has an advance directive and/or request regarding resuscitative measures form on file experiences a medical emergency, facility staff shall do one of the following:
- (1) Immediately telephone 9-1-1, present the advance directive and/or request regarding resuscitative measures form to the responding emergency medical personnel and identify the resident as the person to whom the order refers.
 - (2) Immediately give the advance directive and/or request regarding resuscitative measures form to a physician, registered nurse or licensed vocational nurse if the physician or nurse is in the resident's presence at the time of the emergency and assumes responsibility.
 - (3) Specifically for a terminally ill resident that is receiving hospice services and has completed an advance directive and/or request regarding resuscitative measures form pursuant to Health and Safety Code section 1569.73(c), and is experiencing a life-threatening emergency as displayed by symptoms of impending death that is directly related to the expected course of the resident's terminal illness, the facility may immediately notify the resident's hospice agency in lieu of calling emergency response (9-1-1). For emergencies not directly related to the expected course of the resident's terminal illness, the facility staff shall immediately telephone emergency response (9-1-1).
 - (4) Facilities that employ health care providers, other than Home Health Agencies or Hospice Agencies, may comply with Health and Safety Code section 1569.74.
- (d) After following the procedure in Section 87469(c)(1), (2), (3), or (4), facility staff shall notify the resident's hospice agency and Health Care Surrogate Decision Maker, if applicable.

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Health and Safety Code section 1569.73(c) provides in relevant part:

- "(c) A facility that has obtained a hospice waiver from the department pursuant to this section need not call emergency response services at the time of a life-threatening emergency if the hospice agency is notified instead and all of the following conditions are met:
- (1) The resident is receiving hospice services from a licensed hospice agency.
 - (2) The resident has completed an advance directive, as defined in Section 4605 of the Probate Code, requesting to forego resuscitative measures.

HANDBOOK CONTINUES

87469 ADVANCE DIRECTIVES AND REQUESTS REGARDING RESUSCITATIVE MEASURES (Continued) 87469

HANDBOOK CONTINUES

- (3) The facility has documented that facility staff have received training from the hospice agency on the expected course of the resident's illness and the symptoms of impending death."

Health and Safety Code section 1569.74 states in relevant part:

- "(a) Licensed residential care facilities for the elderly that employ health care providers may establish policies to honor a request to forego resuscitative measures as defined in Section 4780 of the Probate Code.
- (b) Any policy established pursuant to subdivision (a) shall meet all of the following conditions:
- (1) The policy shall be in writing and specify procedures to be followed in implementing the policy.
 - (2) The policy and procedures shall, at all times, be available in the facility for review by the department.
 - (3) The licensee shall ensure that all staff are aware of the policy as well as the procedures to be followed in implementing the policy.
 - (4) A copy of the policy shall be given to each resident who makes a request to forego resuscitative measures, and the resident's primary physician.
 - (5) A copy of the resident's request to forego resuscitative measures shall be maintained in the facility and shall be immediately available for review by facility staff, the licensed health care provider, and the department.
 - (6) Facility staff are prohibited, on behalf of any resident, from signing any directive document as a witness or from being the legally recognized surrogate decision maker.
 - (7) The facility shall provide the resident's physician with a copy of the resident's request to forego resuscitative measures form.
- (c) Any action by a facility that has established policies pursuant to subdivision (a), to honor a resident's request to forego resuscitative measures as provided for in subdivision (a) may only be taken in either of the following ways:
- (1) By a licensed health care provider who is employed by the facility and on the premises at the time of the life threatening emergency.

HANDBOOK CONTINUES

87469 ADVANCE DIRECTIVES AND REQUESTS REGARDING RESUSCITATIVE MEASURES (Continued) 87469

- (2) By notifying, under those conditions specified in subdivision (c) of Section 1569.73, the hospice agency that is caring for a resident receiving hospice services.

HANDBOOK CONTINUES

- (d) Licensed residential care facilities for the elderly that have not established policies pursuant to subdivision (a) may keep an executed request to forego resuscitative measures form in the resident's file and present it to an emergency medical technician or paramedic when authorized to do so in writing by the resident or his or her legally recognized surrogate decisionmaker. The request may be honored by an emergency medical technician or by any health care provider as defined in Section 4621 of the Probate Code, who, in the course of professional or volunteer duties, responds to emergencies."

Probate Code section 4780 provides in relevant part:

- (a) As used in this part:
- (1) "Request regarding resuscitative measures" means a written document, signed by (A) an individual with capacity, or a legally recognized health care decisionmaker, and (B) the individual's physician, that directs a health care provider regarding resuscitative measures. A request regarding resuscitative measures is not an advance health care directive.
- (2) "Request regarding resuscitative measures" includes one, or both of, the following:
- (A) A prehospital "do not resuscitate" form as developed by the Emergency Medical Services Authority or other substantially similar form.
- (B) A Physician Orders for Life Sustaining Treatment form, as approved by the Emergency Medical Services Authority.
- (3) "Physician Orders for Life Sustaining Treatment form" means a request regarding resuscitative measures that directs a health care provider regarding resuscitative and life-sustaining measures.

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NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.73, 1569.74, and 1569.156, Health and Safety Code; and Sections 4621 and 4780, Probate Code.

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Article 9. Resident Records**87505 DOCUMENTATION AND SUPPORT****87505**

Each facility shall document in writing the findings of the pre-admission appraisal and any reappraisal or assessment which was necessary in accordance with Sections 87457, Pre-Admission Appraisal, and 87463, Reappraisals. If supporting documentation from a physician is required, this input shall also be obtained and may be the same assessment as required in Section 87458, Medical Assessment.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.156, 1569.2, 1569.31, 1569.312 and 1569.316, Health and Safety Code.

87506 RESIDENT RECORDS**87506**

- (a) The licensee shall ensure that a separate, complete, and current record is maintained for each resident in the facility or in a central administrative location readily available to facility staff and to licensing agency staff.
- (b) Each resident's record shall contain at least the following information:
 - (1) Resident's legal name and preferred name, as indicated by the resident.
 - (2) Social Security number.
 - (3) Gender identity and preferred pronoun, as indicated by the resident.
 - (4) Dates of admission and discharge.
 - (5) Last known address.
 - (6) Birthdate.
 - (7) Religious preference, if any, and name and address of clergyman or religious advisor, if any.
 - (8) Name, address, and telephone number of the resident's representative, as defined in Section 87101(r), to be notified in case of accident, death, or other emergency.
 - (9) Name, address and telephone number of physician and dentist to be called in an emergency.
 - (10) Reports of the medical assessment specified in Section 87458, Medical Assessment, and of any special problems or precautions.
 - (11) The documentation required by Section 87611 for residents with an allowable health condition.

87506 RESIDENT RECORDS (Continued)**87506**

- (12) Ambulatory status.
- (13) Continuing record of any illness, injury, or medical or dental care, when it impacts the resident's ability to function or needed services.
- (14) Current centrally stored medications as specified in Section 87465, Incidental Medical and Dental Care Services.
- (15) The admission agreement and pre-admission appraisal, specified in Sections 87507, Admission Agreements and 87457, Pre-admission Appraisal.
- (16) Records of resident's cash resources as specified in Section 87217, Safeguards for Resident Cash, Personal Property, and Valuables.
- (17) Documents and information required by the following:
 - (A) Section 87457, Pre-Admission Appraisal;
 - (B) Section 87459, Functional Capabilities;
 - (C) Section 87461, Mental Condition;
 - (D) Section 87462, Social Factors;
 - (E) Section 87463, Reappraisals; and
 - (F) Section 87505, Documentation and Support.
- (c) All information and records obtained from or regarding residents shall be confidential.
 - (1) The licensee shall be responsible for storing active and inactive records and for safeguarding the confidentiality of their contents. The licensee and all employees shall reveal or make available confidential information only upon the resident's written consent or that of his designated representative.
- (d) All resident records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:

87506 RESIDENT RECORDS**87506**

- (1) Licensing representatives shall not remove the following current records for current residents unless the same information is otherwise readily available in another document or format:
 - (A) Religious preference, if any, and name and address of clergyman or religious advisor, if any, as specified in Section 87506(b)(5).
 - (B) Name, address, and telephone number of responsible person(s) as specified in Section 87506(b)(6).
 - (C) Name, address, and telephone number of the resident's physician and dentist as specified in Section 87506(b)(7).
 - (D) Information relating to the resident's medical assessment and any special problems or precautions as specified in Section 87506(b)(8).
 - (E) Documentation required for residents with an allowable health condition as specified in Section 87506(b)(9).
 - (F) Information on ambulatory status as specified in Section 87506(b)(10).
 - (G) Continuing record of any illness, injury, or medical or dental care when it affects the resident's ability to function, or services needed, as specified in Section 87506(b)(11).
 - (H) Records of current medications as specified in Section 87506(b)(12).
 - (I) Any other records containing current emergency or health-related information for current residents.
 - (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
 - (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (e) Original records or photographic reproductions shall be retained for a minimum of three (3) years following termination of service to the resident.

NOTE: Authority cited: Section 1569.30 and 1569.318, Health and Safety Code. Reference: Sections 1439.52, 1569.1, 1569.2, 1569.31, 1569.312 and 1569.315, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

87507 ADMISSION AGREEMENTS**87507**

- (a) The licensee shall complete an individual written admission agreement, as defined in Section 87101(a), with each resident or the resident's representative, if any.
 - (1) The text of the admission agreement, including any attachments and modifications, shall be:
 - (A) Printed in black type of not less than 12-point type size, on plain white paper. The print shall appear on one side of the paper only.
 - (B) Written in clear, understandable, coherent, and unambiguous language, using words with common and everyday meanings, and shall be appropriately divided with each section appropriately titled.
- (b) The licensee shall complete and maintain in the resident's file a Telecommunications Device Notification form (LIC 9158, 11/04) for each resident whose pre-admission appraisal or medical assessment indicates he/she is deaf, hearing-impaired, or otherwise disabled in accordance with Public Utilities Code sections 2881(a) and (c).
- (c) Admission agreements shall be signed and dated, acknowledging the contents of the document, by the resident or the resident's representative, if any, and the licensee or the licensee's designated representative no later than seven days following admission. Attachments to the agreement may be utilized as long as they are also signed and dated as prescribed above.
- (d) The licensee shall retain in the resident's file the original signed and dated admission agreement and all subsequent signed and dated modifications. This does not apply to rate increases which have specific notification requirements as specified in Health and Safety Code section 1569.655.
- (e) The licensee shall provide a copy of the signed and dated current admission agreement, and all subsequent signed and dated modifications, to the resident or the resident's representative, if any, immediately upon signing the admission agreement or modification. The licensee shall provide additional copies to the resident or resident's representative upon request.
 - (1) The licensee shall provide blank copies of the most current approved admission agreement, modifications and attachments immediately to the public upon request. The licensee may charge fees at cost for copying or mailing the admission agreement.
 - (2) The licensee shall conspicuously post in a location accessible to public view in the facility a complete copy of the approved admission agreement, modifications and attachments, or notice of their availability from the facility.
- (f) The licensee shall comply with all applicable terms and conditions set forth in the admission agreement, including all modifications and attachments.

87507 **ADMISSION AGREEMENTS** (Continued)**87507**

(g) Admission agreements shall specify the following:

- (1) Basic services, as defined in Section 87101(b), to be made available.
- (2) Additional items and services which are available.
- (3) Payment provisions, including the following:
 - (A) Rate for all basic services which the facility is required to provide in order to obtain and maintain a license. Basic services rate(s), including:
 1. A comprehensive description of any items and services provided under a single fee, such as monthly fee for room, board and other items and services shall be listed.
 2. A comprehensive description of and the corresponding fee schedule for all basic services not included in the single fee shall be listed.
 3. Exempt-income-allowance may be included if the resident agrees to such charge.
 - (B) Rate for additional items and services, including:
 1. A comprehensive description of and the corresponding fee schedule for all additional items and services not included in the fees for basic services shall be listed.
 2. A separate charge for an item or service may be assessed only if that charge is included in and authorized by the admission agreement.
 3. A statement acknowledging any additional items and/or services that the resident refused to purchase at the time the admission agreement was signed, which shall be signed and dated by the resident or the resident's representative, if any, and attached to the admission agreement.

87507 **ADMISSION AGREEMENTS** (Continued)

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4. If the licensee offers additional items and/or services that were not available at the time the admission agreement was signed, a list of these services and charges shall be provided to the resident or the resident's representative.
 5. A statement acknowledging the acceptance or refusal to purchase additional services that were not available at the time the admission agreement was signed, which shall be signed and dated by the resident or the resident's representative, if any, shall be attached to the admission agreement.
 6. The use of third-party services within the facility shall be explained as they are related to the resident's service plan, including but not limited to, ancillary health, and medical services, how they may be arranged, accessed and monitored, any restrictions on third-party services, and who is financially responsible for the third-party services.
- (C) Any fee that is charged prior to or after admission, shall be clearly specified.
1. If a licensee charges a preadmission fee, the licensee must provide the applicant or his or her representative with a written general statement describing all costs associated with the preadmission fee charges and stating that the preadmission fee is refundable, and describing conditions for the refund.
 2. Only one preadmission fee, as defined in Section 87101(p), may be charged per resident admission.
 3. A recipient under the State Supplementary Program for the Aged, Blind and Disabled Article 5 (commencing with Section 12200) of Chapter 3 of Part 3 of Division 9 of the Welfare and Institutions Code shall not be required to pay any form of preadmission fee or deposit.
 4. A licensee shall not require, request, or accept any funds from a resident or a resident's representative, if any, that constitutes a deposit against any possible damages by the resident.
- (D) Payor of all items and services.
- (E) Due Date.
- (F) Funding source, provided that the resident may refuse to disclose such source.
- (G) A comprehensive description of billing and payment procedures.
- (H) A provision indicating that an itemized monthly statement that lists all separate charges incurred by the resident that are collected by the facility shall be provided to the resident or the resident's representative, if any.

87507 ADMISSION AGREEMENTS (Continued)

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- (4) Modification conditions, including the requirement for the provision of at least 60 days prior written notice to the resident of any rate or rate structure change, or as soon as the licensee is notified of SSI/SSP rate changes.
- (A) Admission agreements involving persons whose care is funded at government-prescribed rates may specify that operative dates of government modifications shall be considered operative dates for basic service rate modifications.
- (B) The conditions under which a licensee may increase or change rates shall be specified in the admission agreement, pursuant to Health and Safety Code sections 1569.655 and 1569.657.

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Health and Safety Code section 1569.655 provides:

- (a) If a licensee of a residential care facility for the elderly increases the rates of fees for residents or makes increases in any of its rate structures for services, the licensee shall provide no less than 60 days' prior written notice to the residents or the residents' representatives setting forth the amount of the increase, the reason for the increase, and a general description of the additional costs, except for an increase in the rate due to a change in the level of care of the resident. This subdivision shall not apply to optional services that are provided by individuals, professionals, or organizations under a separate fee-for-service arrangement with residents.
- (b) No licensee shall charge nonrecurring lump-sum assessments. The notification requirements contained in subdivision (a) shall apply to increases specified in this subdivision. For purposes of this subdivision, "nonrecurring lump-sum assessments" mean rate increases due to unavoidable and unexpected costs that financially obligate the licensee. In lieu of the lump-sum payment, all increases in rates shall be to the monthly rate amortized over a 12-month period. The prohibition against a lump-sum assessment shall not apply to charges for specific goods or services provided to an individual resident.
- (c) If a licensee increases rates for a recipient under the State Supplementary Program for the Aged, Blind and Disabled, described in Article 5 (Commencing with Section 12200) of Chapter 3 of Part 3 of Division 9 of the Welfare and Institutions Code, the licensee shall meet the requirements for SSI/SSP rate increases, as prescribed by law.
- (d) This section shall not apply to licensees of residential care facilities for the elderly that have obtained a certificate of authority to offer continuing care contracts, as defined in paragraph (5) of subdivision (c) of Section 1771.

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87507 ADMISSION AGREEMENTS (Continued)

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Health and Safety Code section 1569.657 provides:

- (a) For any rate increase due to a change in the level of care of the resident, the licensee shall provide the resident and the resident's representative, if any, written notice of the rate increase within two business days after initially providing services at the new level of care. The notice shall include a detailed explanation of the additional services to be provided at the new level of care and an accompanying itemization of the charges.
- (b) This section shall not apply to any resident of the facility who is a recipient of benefits pursuant to Article 5 (commencing with Section 12200) of Chapter 3 of Part 3 of Division 9 of the Welfare and Institutions Code under the State Supplementary Program for Aged, Blind and Disabled.
- (c) This section shall not apply to a provider who has entered into one or more continuing care contracts at a licensed residential care facility for the elderly pursuant to a certificate of authority, as defined in paragraph (5) of subdivision (c) of Section 1771.

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(5) Refund conditions.

- (A) Facility policy concerning refunds, including the conditions under which a refund for advanced monthly fees will be returned in the event of a resident's death, pursuant to Health and Safety Code section 1569.652.
 - 1. Written notice, required pursuant to Health and Safety Code section 1569.652(d), must be made to the individual or entity contractually responsible for the payment of the resident's fees, if that individual or entity is not also the resident's responsible person or other individual or individuals as identified in the admission agreement.

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Health and Safety Code section 1569.652 provides in part:

- (a) A residential care facility for the elderly shall not require advance notice for terminating an admission agreement upon the death of a resident. No fees shall accrue once all personal property belonging to the deceased resident is removed from the living unit.
- (b) Upon the death of a resident, a licensee shall not impede the removal of the resident's personal property from the facility during reasonable hours by an individual or individuals authorized by the resident or the resident's responsible person, as identified in the admission agreement or attachment, or by a court-appointed executor or administrator of the decedent's estate, if applicable.
- (c) A refund of any fees paid in advance covering the time after the resident's personal property has been removed from the facility shall be issued to the individual, individuals, or entity contractually responsible for the fees or, if the deceased resident paid the fees, to the resident's estate, within 15 days after the personal property is removed.
- (d) If fees are assessed while a resident's personal property remains in a unit after the resident is deceased, a licensee shall, within three days of becoming aware of the resident's death, provide to the resident's responsible person, or other individual or individuals as identified in the admission agreement or attachment, written notice of the facility's policies regarding contract termination upon death and refunds.

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- (B) When the Department orders relocation of a resident under the provisions of Section 87223, the resident shall not be held responsible for meeting any advance notice requirement imposed by the licensee in the admission agreement. The licensee shall refund any money to which the resident would have been entitled had notice been given as required by the admission agreement.
- (C) The licensee shall refund any prepaid monthly fees to a resident or the resident's representative, if any, as follows:
 - 1. If a licensee forfeits the license upon the sale or transfer of the facility resulting in the resident's transfer, as specified in Health and Safety Code section 1569.682(a), the licensee surrenders the license or the licensee abandons the facility.
 - 2. If there is a change of use of the facility pursuant to Section 87224(a)(5).

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- (D) The refund of prepaid monthly fees for any condition listed in (C)1. and (C)2. above shall be given as specified below:
1. If the resident provides notice five days before the resident leaves the facility, the proportional daily amount of any prepaid monthly fee(s) shall be refunded at the time the resident leaves the facility and the unit is vacated.
 2. If the resident does not provide the above 5-day notice the licensee shall refund a proportional daily amount of any prepaid monthly fee(s) within seven days from the date that the resident leaves the facility and the unit is vacated.
- (E) Preadmission fees shall be refunded according to the following conditions:
1. A 100 percent refund of a preadmission fee shall be provided to an applicant or the applicant's representative if:
 - a. The applicant decides not to enter the facility prior to the facility completing a preadmission appraisal as defined in Section 87457.
 - b. The licensee fails to provide full written disclosure of preadmission fee charges and refund conditions.
 2. Unless Section 87507(g)(5)(E)1. applies, paid preadmission fees that are greater than five hundred dollars (\$500) shall be refunded to an applicant, resident, or the applicant/resident's representative in the following manner:
 - a. A refund of at least 80 percent of the preadmission fee in excess of \$500 shall be provided if the applicant does not enter the facility after a preadmission appraisal is conducted, or the resident leaves the facility for any reason during the first month of residency.
 - b. A refund of at least 60 percent of the preadmission fee in excess of \$500 shall be provided if the resident leaves the facility for any reason during the second month of residency.
 - c. A refund of at least 40 percent of the preadmission fee in excess of \$500 shall be provided if the resident leaves the facility for any reason during the third month of residency.
 - d. If the resident has lived in the facility for four or more months, the licensee may, but is not required to, make a refund of the preadmission fee.

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3. Notwithstanding Section 87507(g)(5)(E)1., paid preadmission fees greater than five hundred dollars (\$500) shall be refunded to a resident or the resident's representative as follows:
 - a. If a licensee forfeits the license upon the sale or transfer of the facility resulting in the resident's transfer, as specified in Health and Safety Code section 1569.682(a), the licensee surrenders the license, the licensee abandons the facility, or if there is a change of use of the facility pursuant to Section 87224(a)(5):
 - i. A 100 percent refund shall be provided if preadmission fees in excess of \$500 were paid within six months of the eviction notice.
 - ii. A 75 percent refund shall be provided if preadmission fees in excess of \$500 were paid more than six but not more than 12 months before the eviction notice.
 - iii. A 50 percent refund shall be provided if preadmission fees in excess of \$500 were paid more than 12 but not more than 18 months before the eviction notice.
 - iv. A 25 percent refund shall be provided if preadmission fees in excess of \$500 were paid more than 18 but less than 25 months before the eviction notice.
 - v. No preadmission refund is required if preadmission fees were paid 25 months or more before the eviction notice.
 - b. If a resident transfers from the facility due to a notice of temporary suspension or revocation of a license, paid preadmission fees shall be refunded as specified in Health and Safety Code Section 1569.525(f).

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Health and Safety Code section 1569.525(f) provides:

- (f)(1) Notwithstanding Section 1569.651 or any other law, for paid preadmission fees, a resident who transfers from the facility due to the notice of temporary suspension or revocation of a license pursuant to this section is entitled to a refund in accordance with all of the following:
- (A) A 100-percent refund if preadmission fees were paid within six months of either notice of closure required by this section.
 - (B) A 75-percent refund if preadmission fees were paid more than six months, but not more than 12 months, before either notice required by this section.
 - (C) A 50-percent refund if preadmission fees were paid more than 12 months, but not more than 18 months, before either notice required by this section.
 - (D) A 25-percent refund if preadmission fees were paid more than 18 months, but not more than 25 months, before either notice required by this section.
- (2) A preadmission fee refund is not required if preadmission fees were paid 25 months or more before either notice required by this section.
- (3) The preadmission fee refund required by this paragraph shall be paid within 15 days of issuing either notice required by this section. In lieu of the refund, the resident may request that the licensee provide a credit toward the resident's monthly fee obligation in an amount equal to the preadmission fee refund due.
- (4) If a resident transfers from the facility due to the revocation of a license, and the resident gives notice at least five days before leaving the facility, or if the transfer is due to a temporary suspension of the license order, the licensee shall refund to the resident or his or her legal representative a proportional per diem amount of any prepaid monthly fees at the time the resident leaves the facility and the unit is vacated. Otherwise the licensee shall pay the refund within seven days from the date that the resident leaves the facility and the unit is vacated.

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- c. Refunds required by Section 87507(g)(5)(E)3. shall be paid within 15 days of issuing the notice. The resident may request that the licensee provide a credit towards the resident's monthly fees in lieu of the preadmission fee refund.
- (6) The Department or licensing agency's authority to examine residents' records as a part of their evaluation of the facility.
- (7) The facility's policy concerning family visits and other communication with residents, pursuant to Health and Safety Code section 1569.313.

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Health and Safety Code section 1569.313 provides in part:

..."The facility's policy concerning family visits and communication shall be designed to encourage regular family involvement with the resident client and shall provide ample opportunities for family participation in activities at the facility."

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- (8) General facility policies that are for the purpose of making it possible for residents to live together.
 - (A) All facility policies shall be reasonable, and shall not violate any applicable rights, laws or regulations.
 - (B) Procedures for residents to suggest changes to facility policies shall be specified.
- (9) Notification of the availability of the facility grievance procedure(s) to address and resolve resident complaints regarding facility practices.
- (10) The requirements pertaining to the involuntary transfer or eviction of residents, including:
 - (A) The actions, circumstances, or conditions listed in Section 87224, Eviction Procedures, that may result in the resident's eviction from the facility. Except for general facility policies developed pursuant to Section 87224(a)(3), the eviction provisions shall not be modified.
 - (B) Only those grounds specified under state law or regulation that allow for an involuntary transfer or eviction of a resident. Grounds not specified under state law or regulation shall not be included.
 - (C) The justification, worded exactly as shown in the applicable state law or regulation, that permits an eviction.

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- (D) An explanation of the resident's right to notice prior to an involuntary transfer, discharge, or eviction as specified in Health and Safety Code sections 1569.682 and 1569.683.
- (E) The process by which the resident may file a complaint with the department regarding the eviction as specified in Health and Safety Code sections 1569.682(a)(2)(E) and 1569.683(a)(3).
- (F) The relocation assistance offered by the licensee.
- (G) The rights of the resident and the responsibilities of the licensee regarding closure plans, relocation evaluations and assistance, and providing notice when a licensee evicts residents as specified in Health and Safety Code sections 1569.682 and 1569.683.

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Health and Safety Code section 1569.682 provides in part:

- (a) A licensee of a licensed residential care facility for the elderly shall, prior to transferring a resident of the facility to another facility or to an independent living arrangement as a result of the forfeiture of a license, as described in subdivision (a), (b), or (f) of Section 1569.19, or a change of use of the facility pursuant to the department's regulations, take all reasonable steps to transfer affected residents safely and to minimize possible transfer trauma, and shall, at a minimum, do all of the following:
 - (1) Prepare, for each resident, a relocation evaluation of the needs of that resident, which shall include both of the following:
 - (A) Recommendations on the type of facility that would meet the needs of the resident based on the current service plan.
 - (B) A list of facilities, within a 60-mile radius of the resident's current facility, that meet the resident's present needs.
 - (2) Provide each resident or the resident's responsible person with a written notice no later than 60 days before the intended eviction. The notice shall include all of the following:
 - (A) The reason for the eviction, with specific facts to permit a determination of the date, place, witnesses, and circumstances concerning the reasons.
 - (B) A copy of the resident's current service plan.

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- (C) The relocation evaluation.
 - (D) A list of referral agencies.
 - (E) The right of the resident or resident's legal representative to contact the department to investigate the reasons given for the eviction pursuant to Section 1569.35.
 - (F) The contact information for the local long-term care ombudsman, including address and telephone number.
- (3) Discuss the relocation evaluation with the resident and his or her legal representative within 30 days of issuing the notice of eviction.
 - (4) Submit a written report of any eviction to the licensing agency within five days.
 - (5) Upon issuing the written notice of eviction, a licensee shall not accept new residents or enter into new admission agreements.

Health and Safety Code section 1569.683 provides:

- (a) In addition to complying with other applicable regulations, a licensee of a residential care facility for the elderly who sends a notice of eviction to a resident shall set forth in the notice to quit the reasons relied upon for the eviction, with specific facts to permit determination of the date, place, witnesses, and circumstances concerning those reasons. In addition, the notice to quit shall include all of the following:
 - (1) The effective date of the eviction.
 - (2) Resources available to assist in identifying alternative housing and care options, including public and private referral services and case management organizations.
 - (3) Information about the resident's right to file a complaint with the department regarding the eviction, with the name, address, and telephone number of the nearest office of community care licensing and the State Ombudsman.
 - (4) The following statement: "In order to evict a resident who remains in the facility after the effective date of the eviction, the residential care facility for the elderly must file an unlawful detainer action in superior court and receive a written judgment signed by a judge. If the facility pursues the unlawful detainer action, you must be served with a summons and complaint. You have the right to contest the eviction in writing and through a hearing."

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- (b) The licensee, in addition to either serving a 30-day notice, or seeking approval from the department and serving three days notice, on the resident, shall notify, or mail a copy of the notice to quit to, the resident's responsible person.

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- (11) Other conditions under which the agreement may be terminated.
- (12) A resident's right to contact the State Department of Social Services, the long-term care ombudsman, or both, regarding grievances against the facility.
- (h) The admission agreement shall not contain the following:
- (1) Any provision that is prohibited from being included in the admission agreement.
 - (2) Written or oral agreements to waive facility responsibility or liability for the health, safety or the personal property of residents, or the provision of safe and healthful facilities, equipment and accommodations.
 - (3) Any provision that the facility knows or should know is deceptive or unlawful under applicable state or federal law.
 - (4) Any provision that violates the rights of any residents including but not limited to those specified in Section 87468 and in Health and Safety Code section 1569 et seq.
- (i) The admission agreement shall not require advance notice for its termination upon the death of the resident.
- (j) No licensee shall enter into any continuing care contract with any person without approval by the Department in accordance with Health and Safety Code, Chapter 10, Division 2.

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- (k) The admission agreement shall be reviewed at the time of the compliance visit and in response to a complaint involving the admission agreement.
- (l) The licensee shall attach a copy of applicable resident's rights specified by law or regulation to all admission agreements, and shall include information on the reporting of suspected or known elder and dependent abuse, as set forth in Health and Safety Code Section 1569.889.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.159, 1569.31, 1569.312, 1569.313, 1569.525, 1569.54, 1569.651, 1569.652, 1569.655, 1569.657, 1569.682, 1569.880, 1569.881, 1569.882, 1569.883, 1569.884, 1569.885, 1569.886, 1569.887, 1569.888, and 1569.889, Health and Safety Code.

87508 REGISTER OF RESIDENTS**87508**

- (a) The licensee shall ensure that a current register of all residents in the facility is maintained and contains the following updated information:
 - (1) The resident's name and ambulatory status as specified in Sections 87506(b)(1) and (b)(10).
 - (2) Information on the resident's attending physician as specified in Section 87506(b)(7).
 - (3) Information on the resident's responsible person as specified in Section 87506(b)(6).
- (b) Registers of residents shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Registers may be removed if necessary for copying. Removal of registers shall be subject to the following requirements:
 - (1) Licensing representatives shall not remove current registers unless the same information is otherwise readily available in another document or format.
 - (2) Prior to removing any registers, a licensing representative shall prepare a list of the registers to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.